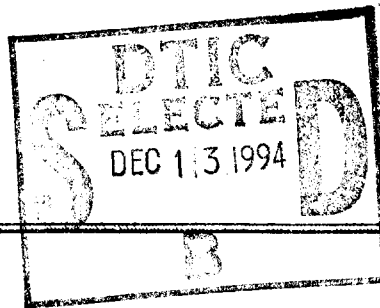


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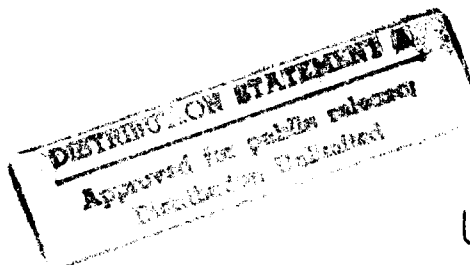


ALLOGENEIC AND AUTOLOGOUS
BONE MARROW TRANSPLANTATION
IN CHAMPUS 1989 - 1993

A TOTAL PATIENT TREATMENT EPISODE ANALYSIS

DR. SCOTT A. OPTENBERG, GM-15
and

DR. JAMES M. THOMPSON, LTC, USAF, MC (RET)



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UNITED STATES ARMY
MEDICAL CENTER AND SCHOOL
FORT SAM HOUSTON, TEXAS 78234

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ABSTRACT (cont.)

of payments by case type (all cases vs. complete episodes paid solely by U.S. government). Several distributional analyses are presented: beneficiary characteristics, both BMT and BMT-related hospitalization diagnoses, and grand total BMT episode mean billing charges by diagnosis. Appendix A provides a detailed breakdown of selected charges, payments and workload for the total BMT episode. Appendix B is a detailed listing of all BMT composite episode records (CER) used in the study, plus cost and workload totals shown by BMT-type, time-period, patient-mortality-status category. Inpatient and ambulatory professional services workload delivered during the total BMT patient treatment episodes are itemized in Appendices C (allogeneic BMT) and D (autologous BMT).

The study shows that BMT care within CHAMPUS results in very extensive billings and payment per case regardless of type of BMT. Results suggest that it would be more appropriate to negotiate preferred provider arrangement for BMT based on the total patient treatment episode rather than some portion of the episode, at least for survivors.

TABLE OF CONTENTS

SECTION	PAGE
Disclaimer.	ii
Report Documentation Page (DD Form 1473).	iii
Table of Contents	v
List of Tables.	vii
Introduction.	1
Methods	2
Extraction of Initial Bone Marrow Transplantation Population	2
Administrative identification of BMT patients . .	3
Identification of BMT patients using institutional claims.	3
Identification of BMT patients using professional claims	3
Definition of Bone Marrow Transplantation Episodes . .	3
Basic episode logic	3
BMT specific logic.	4
Designation of BMT hospitalizations	4
Designation of BMT-related hospitalizations . . .	6
Designation of BMT episode ambulatory professional services and drug reimbursements	7
Results	7
Discussion.	10
Reference Notes	23
Distribution List	25

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Justification	
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Distribution/	
Availability Codes	
Dist	Avail and/or Special
A-1	

LIST OF TABLES

TABLES	PAGE
1 Department of Defense CHAMPUS Allogeneic & Autologous Bone Marrow Transplants Summary of Billings - All Cases Hospital End date: October 1988-July 1992.	12
2 Department of Defense CHAMPUS Allogeneic & Autologous Bone Marrow Transplants Summary of Payments Hospital End Date: October 1988-July 1992.	13
3 Selected Beneficiary Characteristics of Bone Marrow Transplantation Recipients Hospital End Date: October 1988-July 1992.	14
4 Distribution of Hospital-Specified Diagnoses During Allogeneic & Autologous Bone Marrow Transplant Hospitalizations Hospital End Date: October 1998-July 1992 Bone Marrow Type=Allogeneic.	15
5 Distribution of Hospital-Specified Diagnoses During Allogeneic & Autologous Bone Marrow Transplant Hospitalizations Hospital End Date: October 1998-July 1992 Bone Marrow Type=Autologous.	16
6 Distribution of Hospital-Specified Diagnoses During Allogeneic & Autologous Bone Marrow Transplant Related Hospitalizations Hospital End Date: October 1998-July 1992 Bone Marrow Type=Allogeneic.	17
7 Distribution of Hospital-Specified Diagnoses During Allogeneic & Autologous Bone Marrow Transplant Related Hospitalizations Hospital End Date: October 1998-July 1992 Bone Marrow Type=Autologous.	19
8 Distribution of Billing Charges Hospital-Specified Diagnoses During Allogeneic & Autologous Bone Marrow Transplant Related Hospitalizations Hospital End Date: October 1998-July 1992.	21

LIST OF TABLES (CONT'D)

APPENDICES	PAGE
A Summary of Selected Charge/Payment/Workload Total Bone Marrow Transplantation Episode Hospital End Date: October 1988-July 1992	A-1
B Department of Defense CHAMPUS Allogeneic & Autologous Bone Marrow Transplants Total Patient Treatment Episodes Institutional, Professional, Independent Drug Costs Hospital End Date: October 1998-July 1992	B-1
C Department of Defense CHAMPUS Allogeneic & Autologous Bone Marrow Transplants Total Patient Treatment Episodes Professional Services Detailed Workload Hospital End Date: October 1988-July 1992 BMT Type: Allogeneic Bone Marrow Transplantation. . .	C-1
D Department of Defense CHAMPUS Allogeneic & Autologous Bone Marrow Transplants Total Patient Treatment Episodes Professional Services Detailed Workload Hospital End Date: October 1988-July 1992 BMT Type: Autologous Bone Marrow Transplantation. . .	D-1

ALLOGENEIC AND AUTOLOGOUS
BONE MARROW TRANSPLANTATION IN CHAMPUS
A TOTAL PATIENT TREATMENT EPISODE ANALYSIS

Introduction

This report presents a detailed analysis of bone marrow transplantation (BMT) within the Department of Defense Civilian Health and Medical Program for the Uniformed Services (CHAMPUS) between 1989 and 1993. The source of all data in this report was the Tri-Service CHAMPUS Statistical Database Project (TCSDP) Main Relational Database. The TCSDP is a comprehensive project to convert CHAMPUS fiscal intermediary claims into a form suitable for epidemiologic/medical outcomes studies. The TCSDP includes all claims submitted to CHAMPUS for payment from FY 1988 to the present date. There are numerous publications which describe this database and its usefulness in outcomes research.^{1,2,3,4}

All patients who underwent an allogeneic or autologous BMT procedure, where either a hospital and/or a professional services health care provider was paid for some aspect of a BMT procedure beginning 1 Oct 1987 through July 31, 1992, were initially identified as potential candidates for inclusion in this study. Subsequently, a sub-population of these patients was obtained for analysis based on time-oriented selection criteria outlined below. Following determination of this sub-population, a series of software techniques were employed to develop a **total patient treatment episode of BMT**. This approach was very comprehensive with regard to the accumulation of both workload generated and charges/payments made in the delivery of inpatient and ambulatory BMT services. More importantly, this approach provided a much more accurate estimate of total resource consumption throughout the overall BMT episode of care than would have occurred from restricting analysis to only the hospitalization where the BMT took place. Previously, these techniques have been successfully utilized for total episode building and analysis of liver transplantation⁵ and selected cardiovascular procedures.⁶ The principal components of the total patient-treatment-episode (PTE) approach used in this analysis included the following procedures:

a. After identification of BMT patients [see **Methods** below], the PTE-building software extracted not only all treatment charges/payments/workload covered by CHAMPUS, but also captured other useful information. With the exception of duplicate billings, data included amounts denied for payment when total billed charges were derived. In addition, the software enumerated treatment charges paid by other sources (other health insurance, or OHI) and the charges paid by the patient through either co-pays or deductibles.

b. Within the overall BMT episode, the PTE-building software also effectively adjusted for various care patterns particu-

lar to the bone marrow treatment process. These patterns included, but were not limited to, inter-hospital transfers and discharges immediately prior to or after the BMT, as well as unique payment agreements to BMT centers.

c. The total BMT episode was defined to include care rendered during the BMT hospitalization as well as an expanded episode of care bracketing the BMT hospitalization. Services rendered during the BMT hospitalization included hospital care (including professional services billed by the hospital), inpatient professional services billed separately and independent drug reimbursements. Services of the expanded BMT episode included those services rendered to the patient and considered to be part of the overall BMT episode of treatment, but not part of the actual BMT hospitalization. These services included secondary hospitalizations related to BMT which occurred both before and after the BMT. In addition, ambulatory services rendered in conjunction with either the BMT or related secondary hospitalizations were also enumerated. Ambulatory services included both professional services as well as drug reimbursements when made independently. A number of medical criteria were used to accomplish the assignment and these criteria are described below.

Methods

Extraction of Initial Bone Marrow Transplantation Population

The initial accumulation of data included patient identifiers of all patients where some aspect of a BMT procedure was reported as having been reimbursed by CHAMPUS. This initial accumulation of patient identifiers was accomplished by examining all CHAMPUS claims from October 1, 1987 through July 31, 1992 (250+ million encounters). After these identifiers were accumulated, the TCSDP Main Relational Database was reprocessed and all claims submitted and/or paid on behalf of these patients from October 1, 1987 through August 31, 1993 were extracted. The actual analysis for the report was restricted to those patients having a BMT hospitalization discharge date between October 1, 1988 and July 31, 1992. This restriction was employed to account for the time lag between when services are delivered and when services are paid and to insure that data were as complete as possible. In addition, this restriction produced an expanded window which enabled an examination of claims submitted during both pre- and post-hospitalization time periods for evaluation as part of the overall BMT treatment episode.

Patients were identified as having an allogeneic or autologous BMT through a multi-step process. A patient was selected for initial inclusion in the study population if any of the following selection criteria were met: administrative identification, specification using institutional claims, and specification using inpatient professional service claims.

Administrative identification of BMT patients. Two different methods of administrative identification were used:

a. The patient was identified by Wilford Hall USAF Medical Center, San Antonio, TX as having been referred to a civilian hospital for any type of BMT. This identification was based on an internal bone marrow tracking system developed and maintained by Wilford Hall USAF Medical Center. The system provided tracking of DOD CHAMPUS patients referred to civilian hospitals for primarily allogeneic BMT and was in effect during part of the period covered by this report.

b. The patient was identified by the fiscal intermediary and/or CHAMPUS as being either a bone marrow recipient or donor. This identification was based on a tracking system instituted by CHAMPUS to track patients referred to civilian hospitals for BMT. The system was in affect during part of the period covered by this study.

Identification of BMT patients using institutional claims. Identification was accomplished by examination of the procedure codes on institutional services claims. Patients were selected if CHAMPUS reimbursed a hospital for having performed ICD9CM procedure codes (PR) 41.00 BMT Not Otherwise Stated, 41.01 Autologous BMT, 41.02 Allogeneic BMT w/Purging, 41.03 Allogeneic BMT w/o Purging, or 41.91 Aspiration of Bone Marrow From Donor for Transplant.

Identification of BMT patients using professional claims. Patients were identified for the study by procedure codes on inpatient professional services claims. Patients were selected if CHAMPUS reimbursed a professional services provider for having performed CPT-4 PR codes 38230 Bone Marrow Harvesting for Transplantation, 38240 Bone Marrow Transplantation; Allogeneic, or 38241 Bone Marrow Transplantation; Autologous.

For patients meeting any of the above criteria, their patient identifiers were extracted. Duplicate identifiers were removed and the resulting patients were identified for initial inclusion in the study. The TCSDP Main Relational Database was reprocessed and all claims (hospital, inpatient professional, ambulatory professional, and independent drug claims) submitted and paid for these patients beginning October 1, 1987 through August 31, 1993 were extracted. These claims were subsequently evaluated for inclusion into some component of the BMT episode employing the following episodic logic.

Definition of Bone Marrow Transplantation Episodes

Each BMT episode was derived using a longitudinal patient treatment episode approach. First, this approach analyzed the hospital and professional services billed charges, payments, and workload during the actual hospitalization where the BMT was reported to have taken place. Second, both preoperative and post-operative inpatient and ambulatory clinical care delivered

as part of the overall BMT treatment process was evaluated. A number of administrative/clinical rules were employed to derive the total patient treatment episode.

Basic episode logic. Initially, a series of basic logic modules were employed to build the hospital encounters for all hospitalizations during the study period. These basic logic modules resulted in the creation of a "Composite Institutional Record" (CIR) which not only summarized the hospital care but also indexed and summarized those professional services rendered to the patient while hospitalized. The principle output of this logic was one net record for each hospitalization, or stay. This logic accurately assigned and summarized all adjustments, corrections, interim billings, cancellations, etc., to the CIR to which they belonged. The CIR encounter logic adjusted for the numerous deviations in adjudication processing. There are several publications which address the basic CIR logic in detail.⁷

BMT specific logic. Following creation of the basic CIR, data were examined to determine whether this basic logic was adequate for the clinical specialty of BMT. Specifically, when hospitalizations span more than one claim the basic CIR logic code checks for contiguous beginning and ending dates of hospital claims and evidence of transfer. When reviewing the basic CIRs for several of the patients, it was apparent that the hospitalization where the BMT occurred was often split between more than one inpatient stay. In several cases, the patient was an inpatient at an initial hospital (a non-transplant center), and apparently when the BMT was available or scheduled, the patient was "transferred" for purposes of the BMT. However, the patient was not identified as transferred, but rather identified as having been discharged from one hospital and independently admitted to the BMT center. On more than one instance, the hospital dates were not completely contiguous, generating more than one CIR for the same hospital. However, based on record review it was clear that a single hospital stay was present. This situation occurred for one of two reasons: (1) An error was made in reporting of hospital date, or (2) A discharge and subsequent readmission occurred within the same hospital for the BMT. The basic CIR logic source code was adjusted to accommodate these specific transfer occurrences and a single BMT CIR was created, maintaining hospital identification where the BMT was performed. Following the processing of this BMT-specific episode logic, professional services were again indexed to the revised CIR record which resulted. All professional services rendered during the hospitalization where the BMT took place were considered to be part of that BMT clinical process.

Designation of BMT hospitalizations. After creation of the BMT CIR and indexing of professional services, the actual BMT hospitalizations were identified and categorized. A CIR hospitalization was defined as a BMT hospitalization if either the hospital or a professional services provider billing care during that episode reported having performed a BMT procedure of any type, including harvesting. Decision logic was required to

differentiate type of BMT (i.e., allogeneic, autologous, non-specific BMT, harvesting), or combination of BMT types. In a large majority of hospitalizations the type of BMT was clearly delineated by either the hospital and/or professional services provider. However, in several instances although it was clear that a BMT had been performed, the type of BMT was not clearly differentiated. To categorize the BMT as to type, a series of procedures were followed. Prior to categorization of each hospitalization as to type of BMT, it was examined to determine whether certain key events were present. These events or "markers" were then used to determine BMT type. The following steps were followed to perform this assignment:

Step A. Computation of professional services markers:

1. CPT4 38240, 38260: BMT, Allogeneic
2. CPT4 38241: BMT, Autologous
- 3a. CPT4 38230, 85095: BMT Harvest
- 3b. ICD9CM diagnosis (DX) V593: BMT harvest
4. CPT4 77470: Total Body Irradiation (TBI)
5. CPT4 36520: Therapeutic Apheresis
6. CPT4 9968X: BMT Graft-Versus-Host Disease (Acute or Chronic)

Step B. Computation of hospital services markers:

1. ICD9CM PR 410: BMT, w/o Any Mention of Type
2. ICD9CM PR 4100: BMT, Not Otherwise Specified
3. ICD9CM PR 4101: BMT, Autologous
4. ICD9CM PR 4102: BMT, Allogeneic w/Purging
5. ICD9CM PR 4103: BMT, Allogeneic w/o Purging
6. ICD9CM PR 4191: Aspiration of Bone Marrow From Donor for Transplant
7. ICD9CM DX V593: BMT Harvest

Step C. Computation of TBI timing:

1. A4 is present and TBI date precedes A4 date, then TBI was for Allogeneic.
2. A4 is present and A4 date precedes TBI date, then TBI was for Autologous.

Step D. Computation of BMT graft-versus-host disease (acute or chronic) based on presence of CPT4 9968X: Complications of transplanted organ.

Following Steps A-D the following ordered, conditional logic was employed to categorize the BMT CIR as either allogeneic or autologous:

Step E. Presence of A3a, A3b, B6, B7 (and)
no presence of A1, A2, B1-5 (and)
billed charges less than \$25,000 = BMT donor.

Step F. Presence of A1, B4, B5 = BMT: Allogeneic.

Step G. Presence of A2, B3 = BMT: Autologous.

Step H. Presence of DRG 481 - Bone Marrow Transplant (and) no presence of A1, A2 (and) presence of B1, B2, B6, A3a, A3b then the following diagnostic logic applies:

1. ICD9CM DX 284XX (Aplastic Anemia) = Allogeneic
2. ICD9CM DX 2051 (CML) = Allogeneic
3. ICD9CM DX 208XX (Undiff Leukemia) = Allogeneic
4. ICD9CM DX 2050, 2052 and No A5
(AML w/o Apheresis) = Allogeneic
5. ICD9CM DX 2050, 2052 and A5
(AML w/Apheresis) = Autologous
6. ICD9CM DX 204XX (Lymphoid Leukemia) = Allogeneic
7. ICD9CM DX 201XX (Hodgkins Disease) = Autologous
8. ICD9CM DX 140XX-199XX (Solid Organ Tumors) =
Autologous

Step I. Secondary donor designation:

1. Presence of A1, A2 (and)
2. No presence of B1-B5 (and)
3. Length of stay less than 15 days = BMT Donor.

Designation of BMT-related hospitalizations. Following categorization of the hospital episodes where BMT was performed, criteria were applied to remaining hospitalizations to determine whether any of the non-BMT hospitalizations were part of an overall BMT episode. For each patient several criteria were utilized to define a CIR as a secondary or BMT-related hospitalization. For a hospital episode to be defined as part of the overall BMT episode, the episode had to be within a specified time period and meet at least one of several additional criteria (listed below):

a. A discharge date was required to be within 90 days of the admission date of the BMT hospitalization, or an admission date had to be within 365 days of the discharge date of the BMT hospitalization.

b. A hospital diagnosis or one of the four most frequently billed professional services diagnoses must have matched either the diagnosis assigned by the hospital or one of the four most frequently billed professional services diagnoses during the hospitalization where the BMT occurred.

c. Specific BMT-related diagnosis/diagnostic groups were present on the hospitalization record. BMT-related diagnoses were defined as follows:

1. ICD9CM DX 001XX-139XX: Infectious and
Parasitic Diseases.
2. ICD9CM DX 140XX-239XX: Neoplasms.
3. ICD9CM DX 279XX: Disorders Involving the
Immune Mechanism.

4. ICD9CM DX 283XX: Acquired Hemolytic Anemias.
5. ICD9CM DX 284XX: Aplastic Anemia.
6. ICD9CM DX 480XX-487XX: Pneumonia and Influenza.
7. ICD9CM DX 558XX: Other Noninfectious Gastroenteritis and Colitis.
8. ICD9CM DX 780XX: General Symptoms.
9. ICD9CM DX 790XX: Nonspecific Findings of Blood.
10. ICD9CM DX 996XX: Complications Peculiar to Certain Specified Procedures.
11. ICD9CM DX 998XX: Other Complications of Procedures, Not Elsewhere Classified.
12. ICD9CM DX V10XX: Personal History of Neoplasm.
13. ICD9CM DX V42XX: Organ or Tissue Replaced by Transplant.
14. ICD9CM DX V58XX: Encounter for Other and Unspecified Procedures and Aftercare.
15. ICD9CM DX V59XX: Donors.
16. ICD9CM DX V67XX: Follow-up Examination.

Designation of BMT episode ambulatory professional services and drug reimbursements. The criteria for defining ambulatory professional services as part of either the hospitalization where the BMT occurred or a BMT-related hospitalization were the same criteria as were used for assigning secondary hospitalizations, with the exception of period of time. A date of care within 90 days before or after either the BMT hospitalization episode or the BMT-related hospitalization was employed. In those instances where an ambulatory professional service met the qualifications for assignment to both the BMT hospitalization as well as a BMT-related hospitalization (i.e., time periods overlapped), minimum span of time was used to determine final assignment. With regard to drug prescriptions, no diagnostic criteria were used; only the time period of 90 days was employed for assignment.

In the preceding discussion, four BMT episode components were described: (1) the BMT hospitalization (including assigned professional services), (2) the BMT ambulatory professional and prescription services defined as part of that BMT hospitalization, (3) the BMT-related (or secondary) hospitalizations tied to that BMT hospitalization, and (4) the BMT-related ambulatory professional and prescription services. These four components combined together give the total patient treatment episode of BMT care. The final combined record is termed a Composite Episode Record (CER) and formed the basis for much of the results of this study.

Results

A summary of BMT episode billings is presented in Table 1 (p. 12). There was a total of 110 allogeneic and 81 autologous BMT episodes with a hospital discharge date between October 1,

1988 and July 31, 1992. Means and coefficients of variation (CV) of billed charges are presented for each BMT type. These data are further sub-divided and presented separately for the patient mortality categories of transplant death, episode death and episode survival. Transplant death was assigned when the discharge status of the patient was recorded as "deceased" by the hospital where the BMT occurred. Episode death was assigned when a discharge status of deceased was recorded by a hospital anytime within the one year period following live discharge. Finally, episode survival was assigned if no deceased record was detected during the one year time period following discharge. Within mortality categories, billing data are presented not only for the overall BMT episode, but also separately for the two major components of the episode: the BMT hospitalization and the BMT-related hospitalizations.

For allogeneic patients, the mean billed charge per episode ranged from \$225,003 when the patient survived the episode (mean length of stay (LOS) of 81.8 days) to a high of \$432,183 for patients who died during the episode but survived the transplant (LOS: 114.3 days). As anticipated, the majority of charges were for the BMT hospitalization portion of the BMT episode. However, in the case of episode deaths, the mean charge for secondary care occurring within the follow-up period was very expensive (\$185,041 as compared to \$52,497 for transplant deaths). These findings indicate a requirement for extensive follow-up hospital care during the post-operative episode period. The majority of professional services were billed through the hospital for both allogeneic (\$11,211 to \$14,533) and autologous (\$1,129 to \$5,055) BMT, while professional services billed separately ranged from \$198 to \$491, depending on patient mortality status and type of BMT. A similar situation was demonstrated in those billed services categorized as pharmacy or drug services. The vast majority of all pharmacy services were billed through the hospital. This method of billing was demonstrated in both the BMT hospitalization as well as billings which were part of BMT-related hospitalizations.

The CV is a measure of the amount of variation that the BMT population demonstrated and is expressed as a percentage by dividing the mean by the standard deviation. The lowest CVs were produced by the grand total BMT episode mean charges. These findings were consistently demonstrated regardless of whether the patient survived or died during the episode. For example, the grand total BMT episode mean charge CV for allogeneic episode survival was 81.61%. When the episode was sub-divided into the total BMT hospitalization and total BMT-related hospitalization mean charges, the CV increased to 89.52% and 213.92%, respectively. In the case of transplant deaths a mixed trend was demonstrated. While the total BMT-related hospitalization CV of mean billed charges once again increased when the episode was partitioned, the CV for total BMT hospitalization mean charges decreased for both allogeneic and autologous BMT. These findings indicate that the most variable hospitalization category of the BMT episode was preoperative hospitalization.

In Table 2 (p. 13) is presented a summary of mean payments made based on billings itemized in Table 1. Once again payments are arrayed by patient mortality status and BMT type. Initially, payments are presented for all cases in the study. Secondly, mean payments are presented separately for "complete reimbursement" cases which met two selection criteria: (1) cases which had minimal total episode payments made from sources other than the patient (other health insurance (OHI) of less than \$1,000) and (2) episode survival cases where a minimal episode LOS was met (episode LOS > 24 days). These two criteria were employed for two reasons. First, to provide separate mean payment estimates for cases where there was a high probability that CHAMPUS on behalf of the U.S. government, was the sole payer of care. Second, that the payment made was for a complete episode of care.

For allogeneic BMT, all cases, the mean total ranged from \$185,605 (episode survival) to \$278,083 (episode death), and government pay ranged from \$172,253 (episode survival) to \$246,362 (episode death). The mean for all payments for allogeneic cases meeting complete reimbursement criteria increased as expected and ranged from \$198,332 (episode survival) to \$309,496 (episode death) while government pay ranged from \$192,378 (episode survival) to \$302,070 (episode death). For autologous BMT the mean payments for all cases ranged from \$94,982 (transplant death) to \$217,860 (episode death) for all payments and from \$56,171 (transplant death) to \$188,908 (episode death) for government pay. When restricting the analysis to complete reimbursement autologous cases only, payment ranged from \$81,658 (transplant death) to \$220,272 (episode death) for all payments and from \$78,319 (transplant death) to \$215,241 (episode death) for government pay. By restricting the analysis to complete reimbursement cases only, the CV of various categories was reduced indicating that these cases were more homogeneous. Although the principle payer was the government regardless of whether all cases were examined or analysis was confined to complete reimbursement cases only, mean totals paid by both the patient and other sources were significant.

A distributional analysis of various beneficiary characteristics of interest are presented in Table 3 (p. 14). The overall first year mortality rate as detected through CHAMPUS claims was 21.8% for allogeneic BMT and 22.2% for autologous BMT. No autologous BMT patients gave any evidence of being transplanted previously. However, for six allogeneic BMT patients, claims were present which indicated that a previous BMT had taken place. Although distribution was even with regard to gender for both allogeneic and autologous BMT, approximately 50% of both types were performed on patients less than 21 years of age. Diagnostic distributions for both BMT hospitalizations as well as related secondary hospitalizations are presented in Tables 4-7 (pp. 15-20). The majority of allogeneic BMTs were performed for either Lymphoid Leukemia (30.9%), Myeloid Leukemia (24.5%), or Aplastic Anemia (9.1%), while for autologous BMT the top three diagnostic groups were Myeloid Leukemia (24.7%), Hodgkins Disease (16.0%),

or Other Malignant Neoplasms of the Lymphoid and Histiocytic Tissue (11.1%). The most common reason for admission in a secondary hospitalization, regardless of type of BMT was: Encounter for Other and Unspecified Procedures and Aftercare (allogeneic, 13.7%, autologous, 16.3%), followed by Myeloid Leukemia (allogeneic: 12.5%, autologous 15.7%).

Finally, a distributional analysis was performed of grand total BMT episode mean billings by diagnosis group for complete reimbursement episode survivals only (Table 8, p. 21). The mean billings are presented in descending order. The highest diagnosis group for allogeneic BMT was General Symptoms. The two cases which comprised this group were 780.3 Convulsions and 780.6 Pyrexia of Unknown Origin. For autologous BMT the highest diagnostic group was Encounter for Other and Unspecified Procedures and Aftercare. For both types of BMT, Septicemia was associated with high mean billed charges.

Appendix A provides a detailed breakdown of selected charges, payments, and workload for the overall BMT transplantation episode. Appendix B provides a detailed listing of all BMT CERs used in the study. Patients are ordered by time period and mortality status, and secondly by BMT episode payment grand total. Numerous data fields from the BMT CER are presented for review. In Appendix C is presented an itemized listing of professional services workload delivered during allogeneic BMT. Professional services rendered during the BMT hospital stay portion of the episode are presented. Secondly, allogeneic BMT episode ambulatory services are itemized in a similar fashion. Presented are the CPT-4 procedure code and name, the total patients that had at least one of those procedures and the number of treatment episodes, visits, and services accumulated within that category. All claims for a unique patient/date/procedure level were counted as being one professional services episode. By using this type of episode logic, billings where the technical and professional components are billed separately were effectively reconciled. Also included are the government pay per episode and service as well as the accumulated totals for patient pay and the amount paid by other sources. The procedure categories are ranked by government pay. The professional services rendered in support of secondary hospitalizations that were defined as part of the allogeneic BMT episode as well as their associated ambulatory services are also itemized in Appendix C. Appendix D provides the same type of information for autologous BMT.

Discussion

It is clear that bone marrow transplantation care within CHAMPUS results in very extensive billings and payments per case regardless of type of BMT. Of the two types of BMT, allogeneic BMT is substantially more costly on a per case basis. It is very significant to what extent BMT-related services are rendered outside the BMT hospitalization itself, whether this care is pre/post-operative admissions or associated ambulatory services.

Also significant is the extent to which the CV of the mean charge or payment increases as the overall episode of BMT is sub-divided into various component parts. This increase in variation has important implications as the Department of Defense continues to move into a managed care approach to service delivery, particularly within CHAMPUS. Based on these results, it would appear to be more appropriate to negotiate preferred provider arrangements for BMT based on the **total patient treatment episode** rather than some portion of the episode, at least for those patients which survive the BMT episode.

Death rates should be interpreted with caution. Transplant and episode deaths were based on a record entry as part of reimbursement through CHAMPUS. This approach could not guarantee that all deaths were detected. If a death were to occur outside the hospital, or if the hospital did not submit a claim to CHAMPUS as part of that death, there would be no record in CHAMPUS. If this situation occurred the death rate would be under-estimated. It should be emphasized that in a number of episodes, separate hospitalizations were combined into one BMT hospitalization. In those instances, only one hospital provider name was maintained on the record. To this extent, the amounts reflected in those charge categories addressing the BMT hospitalization portion of the total BMT episode may reflect billings and payments to more than one hospital. In addition, the episode-building logic used in this study combined separate hospitalizations by the same provider, if upon review, these were judged to be part of a single BMT hospitalization.

TABLE 1
DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
SUMMARY OF BILLINGS - ALL CASES
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

TYPE OF BMT=ALLOGENEIC (N=110)						
LABEL	TRANSPLANT DEATH (N=15)		EPISODE DEATH (N=9)		EPISODE SURVIVAL (N=86)	
	MEAN	CV(%)	MEAN	CV(%)	MEAN	CV(%)
BMT EPISODE LENGTH OF STAY	79.6	68.21	114.3	47.35	81.8	86.66
GRND TOTAL BMT EPISODE	\$291,942	81.10	\$432,183	92.42	\$225,003	81.61
TOTAL BMT HOSP	\$231,389	73.83	\$226,721	108.29	\$144,250	89.52
BMT HOSP INST	\$231,186	73.91	\$226,446	108.28	\$143,792	89.84
PROF (Billed w/Hosp Inst)	\$11,211	150.16	\$14,533	150.13	\$11,933	196.60
DRUG (Billed w/Hosp Inst)	\$12,157	199.58	\$25,774	155.41	\$13,081	167.39
BMT HOSP PROF (Billed Independently)	\$203	122.84	\$241	126.91	\$297	143.46
BMT HOSP DRUG (Billed Independently)	\$0	n/a	\$34	198.86	\$162	373.60
BMT HOSP AMB PROF	\$2,608	127.62	\$12,215	130.70	\$7,991	165.22
BMT HOSP AMB DRUG	\$0	n/a	\$35	300.00	\$212	410.49
TOTAL BMT RELATED HOSP	\$52,497	199.09	\$185,041	105.27	\$62,278	213.92
BMT HOSP RELATED INST	\$52,314	199.84	\$183,269	106.26	\$60,704	217.28
PROF (Billed w/Hosp Inst)	\$752	222.13	\$11,510	152.91	\$3,768	273.91
DRUG (Billed w/Hosp Inst)	\$3,006	307.46	\$40,659	199.01	\$10,615	274.06
BMT HOSP RELATED PROF (Billed Independently)	\$157	132.45	\$1,520	111.78	\$1,324	257.02
BMT HOSP RELATED DRUG (Billed Independently)	\$27	387.30	\$251	248.07	\$249	405.74
BMT HOSP RELATED AMB PROF	\$5,428	169.90	\$8,036	178.47	\$10,102	206.35
BMT HOSP RELATED AMB DRUG	\$19	387.30	\$134	273.17	\$170	279.23
TYPE OF BMT=AUTOLOGOUS (N=81)						
LABEL	TRANSPLANT DEATH (N=10)		EPISODE DEATH (N=8)		EPISODE SURVIVAL (N=63)	
	MEAN	CV(%)	MEAN	CV(%)	MEAN	CV(%)
BMT EPISODE LENGTH OF STAY	47.8	66.49	80.6	23.41	73.7	63.02
GRND TOTAL BMT EPISODE	\$121,502	77.74	\$284,250	67.09	\$206,527	55.76
TOTAL BMT HOSP	\$95,334	60.20	\$175,887	65.68	\$145,220	73.98
BMT HOSP INST	\$95,116	60.37	\$175,351	65.52	\$144,788	74.11
PROF (Billed w/Hosp Inst)	\$2,804	180.31	\$5,055	215.91	\$1,129	214.34
DRUG (Billed w/Hosp Inst)	\$5,958	130.60	\$23,033	175.58	\$20,294	163.58
BMT HOSP PROF (Billed Independently)	\$198	158.49	\$491	154.72	\$353	364.91
BMT HOSP DRUG (Billed Independently)	\$20	316.23	\$46	235.60	\$79	338.63
BMT HOSP AMB PROF	\$1,474	157.95	\$9,613	146.22	\$7,152	156.78
BMT HOSP AMB DRUG	\$101	262.01	\$114	147.76	\$62	421.65
TOTAL BMT RELATED HOSP	\$23,083	227.20	\$82,316	78.33	\$46,103	117.59
BMT HOSP RELATED INST	\$22,764	228.66	\$80,532	79.70	\$45,020	118.66
PROF (Billed w/Hosp Inst)	\$46	811.88	\$4,880	182.29	\$3,467	279.19
DRUG (Billed w/Hosp Inst)	\$197	344.17	\$9,421	181.78	\$6,694	163.11
BMT HOSP RELATED PROF (Billed Independently)	\$303	161.03	\$1,554	95.98	\$768	120.98
BMT HOSP RELATED DRUG (Billed Independently)	\$16	191.56	\$229	212.62	\$315	357.88
BMT HOSP RELATED AMB PROF	\$1,510	312.31	\$16,480	118.35	\$7,881	182.92
BMT HOSP RELATED AMB DRUG	\$0	n/a	\$0	n/a	\$107	354.86

TABLE 2
DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
SUMMARY OF PAYMENTS
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

ALL CASES

LABEL	TYPE OF BMT=ALLOGENEIC					
	TRANSPLANT DEATH (N=15)		EPISODE DEATH (N=9)		EPISODE SURVIVAL (N=86)	
	MEAN	CV(%)	MEAN	CV(%)	MEAN	CV(%)
BMT EPISODE LENGTH OF STAY	79.6	68.21	114.3	47.35	81.8	86.66
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$194,167	87.75	\$278,083	63.13	\$185,605	69.39
TOTAL BMT EPISODE GOVT PAY	\$184,250	94.54	\$246,362	79.67	\$172,253	76.14
TOTAL BMT EPISODE PNT PAY	\$3,583	137.35	\$11,099	131.50	\$6,321	103.43
TOTAL BMT EPISODE PAID BY OTHER SOURCES (OHI)	\$6,335	387.30	\$20,622	278.91	\$7,031	475.26

LABEL	TYPE OF BMT=AUTOLOGOUS					
	TRANSPLANT DEATH (N=10)		EPISODE DEATH (N=8)		EPISODE SURVIVAL (N=63)	
	MEAN	CV(%)	MEAN	CV(%)	MEAN	CV(%)
BMT EPISODE LENGTH OF STAY	47.8	66.49	80.6	23.41	73.7	63.02
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$94,982	104.51	\$217,860	67.55	\$163,719	57.19
TOTAL BMT EPISODE GOVT PAY	\$56,171	164.37	\$188,908	87.60	\$124,911	84.83
TOTAL BMT EPISODE PNT PAY	\$2,604	110.19	\$6,959	112.23	\$8,487	215.69
TOTAL BMT EPISODE PAID BY OTHER SOURCES (OHI)	\$36,208	195.37	\$21,992	282.84	\$30,321	226.07

COMPLETE REIMBURSEMENT CASES

LABEL	TYPE OF BMT=ALLOGENEIC					
	TRANSPLANT DEATH (N=14)		EPISODE DEATH (N=7)		EPISODE SURVIVAL (N=74)	
	MEAN	CV(%)	MEAN	CV(%)	MEAN	CV(%)
BMT EPISODE LENGTH OF STAY	82.9	66.14	119.7	49.31	88.5	83.63
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$200,933	86.95	\$309,496	60.95	\$198,332	65.58
TOTAL BMT EPISODE GOVT PAY	\$197,131	87.85	\$302,070	61.75	\$192,378	67.10
TOTAL BMT EPISODE PNT PAY	\$3,802	132.28	\$7,426	115.69	\$5,947	107.06

LABEL	TYPE OF BMT=AUTOLOGOUS					
	TRANSPLANT DEATH (N=7)		EPISODE DEATH (N=7)		EPISODE SURVIVAL (N=44)	
	MEAN	CV(%)	MEAN	CV(%)	MEAN	CV(%)
BMT EPISODE LENGTH OF STAY	53.9	63.94	83.3	22.45	82.9	62.22
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$81,658	131.14	\$220,272	72.09	\$179,164	50.92
TOTAL BMT EPISODE GOVT PAY	\$78,319	133.14	\$215,241	74.15	\$173,853	51.21
TOTAL BMT EPISODE PNT PAY	\$3,339	93.80	\$5,031	120.01	\$5,279	134.85

TABLE 3
SELECTED BENEFICIARY CHARACTERISTICS OF
BONE MARROW TRANSPLANTATION RECIPIENTS
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

CATEGORY	ALLOGENEIC (N=110)		AUTOLOGOUS (N=81)	
	COUNT	PERCENT	COUNT	PERCENT
PNT MORTALITY STATUS				
TRANSPLANT DEATH	15	13.6	10	12.3
EPISODE DEATH	9	8.2	8	9.9
EPISODE SURVIVAL	86	78.2	63	77.8
WHMC REFERRAL				
NONE	86	78.2	80	98.8
TREATED	1	0.9	1	1.2
REFERRED	23	20.9		
PREVIOUS BMT				
NONE	104	94.5	81	100.0
ONE	6	5.5		
GENDER				
MALE	60	54.5	40	49.4
FEMALE	50	45.5	41	50.6
AGE GROUP				
LE 10	49	44.5	22	27.2
GT 10 AND LE 20	21	19.1	15	18.5
GT 20 AND LE 30	12	10.9	11	13.6
GT 30 AND LE 40	11	10.0	5	6.2
GT 40 AND LE 50	11	10.0	12	14.8
GT 50 AND LE 60	4	3.6	13	16.0
GT 60	2	1.8	3	3.7
BENEFICIARY CATEGORY				
A/D DEP	73	66.4	40	49.4
RET/DEC	14	12.7	10	12.3
RET/DEC DEP	23	20.9	31	38.3

TABLE 4
DISTRIBUTION OF
HOSPITAL-SPECIFIED DIAGNOSES
DURING ALLOGENEIC & AUTOLOGOUS
BONE MARROW TRANSPLANT HOSPITALIZATIONS
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

BONE MARROW TYPE=ALLOGENEIC

HOSPITAL DIAGNOSIS (3 DIGIT GROUP)		COUNT	PERCENT
CODE	SHORT NAME		
204	LYMPHOID LEUKEMIA	34	30.9
205	MYELOID LEUKEMIA	27	24.5
284	APLASTIC ANEMIA	10	9.1
279	DIS IMMUNE MECHANISM	5	4.5
200	LYMPHOSARC/RETICULOSARC	4	3.6
038	SEPTICEMIA	3	2.7
194	MAL NEO OTHER ENDOCRINE	3	2.7
202	OTH MAL NEO LYMPH/HISTIO	3	2.7
208	LEUKEMIAUNSPECIF CELL	3	2.7
V10	HX OF MALIGNANT NEOPLASM	2	1.8
201	HODGKINS DISEASE	2	1.8
206	MONOCYTIC LEUKEMIA	2	1.8
238	UNC BEHAV NEO NEC/NOS	2	1.8
277	METABOLISM DIS NEC/NOS	2	1.8
780	GENERAL SYMPTOMS	2	1.8
195	MAL NEO OTH/ILLDEF SITE	1	0.9
203	MULTIPLE MYELOMA ET AL	1	0.9
288	WBC DISORDERS	1	0.9
486	PNEUMONIA, ORGANISM NOS	1	0.9
586	RENAL FAILURE NOS	1	0.9
996	REPLACE & GRAFT COMPLIC	1	0.9

TABLE 5
DISTRIBUTION OF
HOSPITAL-SPECIFIED DIAGNOSES
DURING ALLOGENEIC & AUTOLOGOUS
BONE MARROW TRANSPLANT HOSPITALIZATIONS
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

BONE MARROW TYPE=AUTOLOGOUS

HOSPITAL DIAGNOSIS (3 DIGIT GROUP)		COUNT	PERCENT
CODE	SHORT NAME		
205	MYELOID LEUKEMIA	20	24.7
201	HODGKINS DISEASE	13	16.0
202	OTH MAL NEO LYMPH/HISTIO	9	11.1
204	LYMPHOID LEUKEMIA	6	7.4
198	SEC MALIG NEO OTH SITES	5	6.2
200	LYMPHOSARC/RETICULOSARC	4	4.9
194	MAL NEO OTHER ENDOCRINE	3	3.7
V42	ORGAN TRANSPLANT STATUS	2	2.5
V58	ENCOUNTR PROC/AFTRCR NEC	2	2.5
158	MALIG NEO PERITONEUM	2	2.5
174	MALIG NEO FEMALE BREAST	2	2.5
196	MALIG NEO LYMPH NODES	2	2.5
203	MULTIPLE MYELOMA ET AL	2	2.5
V10	HX OF MALIGNANT NEOPLASM	1	1.2
038	SEPTICEMIA	1	1.2
162	MAL NEO TRACHEA/LUNG	1	1.2
191	MALIGNANT NEOPLASM BRAIN	1	1.2
195	MAL NEO OTH/ILLDEF SITE	1	1.2
197	SECONDARY MAL NEO GI/RESP	1	1.2
389	HEARING LOSS	1	1.2
461	ACUTE SINUSITIS	1	1.2
780	GENERAL SYMPTOMS	1	1.2

TABLE 6
DISTRIBUTION OF
HOSPITAL-SPECIFIED DIAGNOSES
DURING ALLOGENEIC & AUTOLOGOUS
BONE MARROW TRANSPLANT RELATED HOSPITALIZATIONS
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

BONE MARROW TYPE=ALLOGENEIC

HOSPITAL DIAGNOSIS (3 DIGIT GROUP)		COUNT	PERCENT
CODE	SHORT NAME		
V58	ENCOUNTR PROC/AFTRCR NEC	48	13.7
205	MYELOID LEUKEMIA	44	12.5
204	LYMPHOID LEUKEMIA	38	10.8
996	REPLACE & GRAFT COMPLIC	36	10.3
038	SEPTICEMIA	21	6.0
780	GENERAL SYMPTOMS	19	5.4
288	WBC DISORDERS	16	4.6
284	APLASTIC ANEMIA	14	4.0
208	LEUKEMIA-UNSPECIF CELL	11	3.1
202	OTH MAL NEO LYMPH/HISTIO	10	2.8
053	HERPES ZOSTER	5	1.4
194	MAL NEO OTHER ENDOCRINE	5	1.4
206	MONOCYTIC LEUKEMIA	5	1.4
200	LYMPHOSARC/RETICULOSARC	4	1.1
201	HODGKINS DISEASE	4	1.1
287	PURPURA & OTH HEMOR COND	4	1.1
203	MULTIPLE MYELOMA ET AL	3	0.9
276	FLUID/ELECTROLYTE DIS	3	0.9
466	AC BRONCHITIS/BRONCHIOL	3	0.9
786	RESP SYS/OTH CHEST SYMP	3	0.9
V67	FOLLOW-UP EXAMINATION	2	0.6
117	OTHER MYCOSES	2	0.6
279	DIS IMMUNE MECHANISM	2	0.6
382	OTITIS MEDIA, SUPPUR/NOS	2	0.6
461	ACUTE SINUSITIS	2	0.6
473	CHRONIC SINUSITIS	2	0.6
558	OTH NONINF GASTROENTERIT	2	0.6
789	OTH ABDOMEN/PELVIS SYMP	2	0.6
V42	ORGAN TRANSPLANT STATUS	1	0.3
V55	ATTEN TO ARTIFICIAL OPEN	1	0.3
V59	DONOR	1	0.3
V71	OBSERVATION-SUSPECT COND	1	0.3
032	DIPHThERIA	1	0.3
079	VIRAL INF IN OTH DIS/NOS	1	0.3
112	CANDIDIASIS	1	0.3
136	INF/PARASITE DIS NEC/NOS	1	0.3
158	MALIG NEO PERITONEUM	1	0.3
160	MAL NEO NASAL CAV/SINUS	1	0.3
281	OTHER DEFICIENCY ANEMIA	1	0.3
324	CNS ABSCESS	1	0.3
348	OTHER BRAIN CONDITIONS	1	0.3
367	DISORDERS OF REFRACTION	1	0.3
424	OTH ENDOCARDIAL DISEASE	1	0.3

TABLE 6 (CONT'D)
DISTRIBUTION OF
HOSPITAL-SPECIFIED DIAGNOSES
DURING ALLOGENEIC & AUTOLOGOUS
BONE MARROW TRANSPLANT RELATED HOSPITALIZATIONS
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

BONE MARROW TYPE=ALLOGENEIC

HOSPITAL DIAGNOSIS (3 DIGIT GROUP)	COUNT	PERCENT	
CODE SHORT NAME			
425	CARDIOMYOPATHY	1	0.3
435	TRANSIENT CEREB ISCHEMIA	1	0.3
437	OTH CEREBROVASC DISEASE	1	0.3
458	HYPOTENSION	1	0.3
465	AC URI MULT SITES/NOS	1	0.3
486	PNEUMONIA, ORGANISM NOS	1	0.3
490	BRONCHITIS NOS	1	0.3
493	ASTHMA	1	0.3
514	PULM CONGEST/HYPOSTASIS	1	0.3
518	OTHER LUNG DISEASES	1	0.3
536	STOMACH FUNCTION DISORD	1	0.3
566	ANAL & RECTAL ABSCESS	1	0.3
569	OTH INTESTINAL DISORDERS	1	0.3
574	CHOLELITHIASIS	1	0.3
584	ACUTE RENAL FAILURE	1	0.3
599	OTH URINARY TRACT DISOR	1	0.3
681	CELLULITIS, FINGER/TOE	1	0.3
682	OTHER CELLULITIS/ABSCESS	1	0.3
756	OTH MUSCULOSKELET ANOMAL	1	0.3
783	NUTRIT/METAB/DEVEL SYMP	1	0.3
787	GI SYSTEM SYMPTOMS	1	0.3
794	ABNORMAL FUNCTION STUDY	1	0.3
997	SURG COMPL-BODY SYST NEC	1	0.3
998	OTH SURGICAL COMPL NEC	1	0.3

TABLE 7
DISTRIBUTION OF
HOSPITAL-SPECIFIED DIAGNOSES
DURING ALLOGENEIC & AUTOLOGOUS
BONE MARROW TRANSPLANT RELATED HOSPITALIZATIONS
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

BONE MARROW TYPE=AUTOLOGOUS

HOSPITAL DIAGNOSIS (3 DIGIT GROUP)		COUNT	PERCENT
CODE	SHORT NAME		
V58	ENCOUNTR PROC/AFTRCR NEC	50	16.3
205	MYELOID LEUKEMIA	48	15.7
194	MAL NEO OTHER ENDOCRINE	20	6.5
288	WBC DISORDERS	18	5.9
202	OTH MAL NEO LYMPH/HISTIO	17	5.6
038	SEPTICEMIA	14	4.6
191	MALIGNANT NEOPLASM BRAIN	10	3.3
204	LYMPHOID LEUKEMIA	10	3.3
996	REPLACE & GRAFT COMPLIC	10	3.3
201	HODGKINS DISEASE	8	2.6
780	GENERAL SYMPTOMS	8	2.6
198	SEC MALIG NEO OTH SITES	7	2.3
200	LYMPHOSARC/RETICULOSARC	4	1.3
206	MONOCYTIC LEUKEMIA	4	1.3
276	FLUID/ELECTROLYTE DIS	4	1.3
V67	FOLLOW-UP EXAMINATION	3	1.0
V71	OBSERVATION-SUSPECT COND	3	1.0
052	CHICKENPOX	3	1.0
053	HERPES ZOSTER	3	1.0
054	HERPES SIMPLEX	3	1.0
158	MALIG NEO PERITONEUM	3	1.0
174	MALIG NEO FEMALE BREAST	3	1.0
208	LEUKEMIA-UNSPECIF CELL	3	1.0
287	PURPURA & OTH HEMOR COND	3	1.0
486	PNEUMONIA, ORGANISM NOS	3	1.0
599	OTH URINARY TRACT DISOR	3	1.0
V10	HX OF MALIGNANT NEOPLASM	2	0.7
V59	DONOR	2	0.7
197	SECONDARY MAL NEO GI/RESP	2	0.7
285	ANEMIA NEC/NOS	2	0.7
733	OTH BONE & CARTILAGE DIS	2	0.7
008	INTESTINAL INFECTION NEC	1	0.3
079	VIRAL INF IN OTH DIS/NOS	1	0.3
117	OTHER MYCOSES	1	0.3
164	MAL NEO THYMUS/MEDIASTIN	1	0.3
190	MALIGNANT NEOPLASM EYE	1	0.3
195	MAL NEO OTH/ILL-DEF SITE	1	0.3
196	MALIG NEO LYMPH NODES	1	0.3
203	MULTIPLE MYELOMA ET AL	1	0.3
269	OTH NUTRITION DEFICIENCY	1	0.3
277	METABOLISM DIS NEC/NOS	1	0.3
284	APLASTIC ANEMIA	1	0.3
429	ILL-DEFINED HEART DIS	1	0.3

TABLE 7 (CONT'D)
DISTRIBUTION OF
HOSPITAL-SPECIFIED DIAGNOSES
DURING ALLOGENEIC & AUTOLOGOUS
BONE MARROW TRANSPLANT RELATED HOSPITALIZATIONS
HOSPITAL END DATE: OCTOBER 1988-JULY 1992

BONE MARROW TYPE=AUTOLOGOUS

HOSPITAL DIAGNOSIS (3 DIGIT GROUP)	COUNT	PERCENT
CODE SHORT NAME		
431 INTRACEREBRAL HEMORRHAGE	1	0.3
462 ACUTE PHARYNGITIS	1	0.3
463 ACUTE TONSILLITIS	1	0.3
465 AC URI MULT SITES/NOS	1	0.3
473 CHRONIC SINUSITIS	1	0.3
480 VIRAL PNEUMONIA	1	0.3
518 OTHER LUNG DISEASES	1	0.3
519 OTH RESP SYSTEM DISEASES	1	0.3
526 JAW DISEASES	1	0.3
558 OTH NONINF GASTROENTERIT	1	0.3
567 PERITONITIS	1	0.3
577 DISEASES OF PANCREAS	1	0.3
708 URTICARIA	1	0.3
785 CARDIOVASCULAR SYS SYMP	1	0.3
786 RESP SYS/OTH CHEST SYMP	1	0.3
787 GI SYSTEM SYMPTOMS	1	0.3
789 OTH ABDOMEN/PELVIS SYMP	1	0.3
998 OTH SURGICAL COMPL NEC	1	0.3
999 COMPLIC MEDICAL CARE NEC	1	0.3

TABLE 8
DISTRIBUTION OF BILLING CHARGES
HOSPITAL-SPECIFIED DIAGNOSES
DURING ALLOGENEIC & AUTOLOGOUS
BONE MARROW TRANSPLANT HOSPITALIZATIONS
HOSPITAL END DATES: OCTOBER 1988-JULY 1992

BONE MARROW TYPE=ALLOGENEIC

HOSPITAL DIAGNOSIS (3 DIGIT GROUP) CODE	SHORT NAME	COUNT	GRAND TOTAL BMT EPISODE MEAN BILLINGS	CV
780	GENERAL SYMPTOMS	2	\$630,243	98.490
038	SEPTICEMIA	1	\$620,534	n/a
194	MAL NEO OTHER ENDOCRINE	3	\$461,212	129.105
277	METABOLISM DIS NEC/NOS	2	\$426,541	56.567
586	RENAL FAILURE NOS	1	\$347,729	n/a
202	OTH MAL NEO LYMPH/HISTIO	1	\$346,785	n/a
V10	HX OF MALIGNANT NEOPLASM	1	\$299,006	n/a
238	UNC BEHAV NEO NEC/NOS	1	\$286,909	n/a
208	LEUKEMIA-UNSPECIF CELL	3	\$272,971	35.434
279	DIS IMMUNE MECHANISM	4	\$254,812	33.779
205	MYELOID LEUKEMIA	21	\$221,211	38.264
284	APLASTIC ANEMIA	6	\$216,113	104.245
204	LYMPHOID LEUKEMIA	20	\$190,750	46.846
195	MAL NEO OTH/ILL-DEF SITE	1	\$160,711	n/a
201	HODGKINS DISEASE	2	\$148,098	14.197
200	LYMPHOSARC/RETICULOSARC	2	\$137,629	6.583
288	WBC DISORDERS	1	\$133,611	n/a
203	MULTIPLE MYELOMA ET AL	1	\$113,315	n/a
206	MONOCYTIC LEUKEMIA	1	\$97,780	n/a
ALLOGENEIC TOTAL		74		

BONE MARROW TYPE=AUTOLOGOUS

V58	ENCOUNTR PROC/AFTRCR NEC	1	\$408,251	n/a
198	SEC MALIG NEO OTH SITES	3	\$316,424	69.758
038	SEPTICEMIA	1	\$299,947	n/a
V42	ORGAN TRANSPLANT STATUS	2	\$278,187	29.931
V10	HX OF MALIGNANT NEOPLASM	1	\$259,368	n/a
205	MYELOID LEUKEMIA	14	\$246,666	41.852
194	MAL NEO OTHER ENDOCRINE	3	\$223,959	33.923
780	GENERAL SYMPTOMS	1	\$205,555	n/a
201	HODGKINS DISEASE	5	\$187,129	80.681
204	LYMPHOID LEUKEMIA	2	\$172,139	33.052
191	MALIGNANT NEOPLASM BRAIN	1	\$171,604	n/a
196	MALIG NEO LYMPH NODES	2	\$150,020	10.719
389*	HEARING LOSS	1	\$139,688	n/a
158	MALIG NEO PERITONEUM	2	\$135,800	9.108
195	MAL NEO OTH/ILL-DEF SITE	1	\$133,743	n/a
202	OTH MAL NEO LYMPH/HISTIO	3	\$128,097	29.460
200	LYMPHOSARC/RETICULOSARC	1	\$97,417	n/a
AUTOLOGOUS TOTAL		44		

*Note: 277-Metabolism Dis NEC/NOS assigned by prof serv provider.

Reference Notes

¹Scott A. Optenberg, Wayne R. Wilson, Frank Lenart, Richard E. Bigelow, & Jerome Nelson, Coordinated Care Data Dictionaries, Tri-Service CHAMPUS Statistical Database Report No. RP93-007 (Fort Sam Houston, TX: Health Care Studies & Clinical Investigation, 1992). (DTIC: AD B170292)

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³Scott A. Optenberg & Kathleen A. Moon, Department of Army Health Services Command, CHAMPUS Catastrophic Payments, First-Third Quarters, Fiscal Year 1992, Gateway Catchment Areas, Tri-Service Statistical Database Report No. RP92-015 (Fort Sam Houston, TX: Health Care Studies & Clinical Investigation, 1992). (DTIC: AD B166677)

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⁶Scott A. Optenberg, The Cost of Cardiac Valve Replacement, Valvuloplasty, Coronary Bypass, Angioplasty in DOD Region 7: a Patient Treatment Episode Analysis, Tri-Service Statistical Database Report No. RP92-012A (Fort Sam Houston, TX: Health Care Studies & Clinical Investigation, 1992). (DTIC: AD B164492)

⁷Optenberg, Data Dictionaries.

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APPENDIX A

SUMMARY OF SELECTED CHARGE/PAYMENT/WORKLOAD

TOTAL BONE MARROW TRANSPLANTATION EPISODE

HOSPITAL END DATE: OCTOBER 1988-JULY 1992

SUMMARY OF SELECTED CHARGE/PAYMENT/WORKLOAD
TOTAL BONE MARROW TRANSPLANTATION EPISODE
HOSPITAL END DATE: OCTOBER 1988-JULY 1992
TYPE OF BMT=ALLOGENEIC

PNT MORTALITY STATUS: TRANSPLANT DEATH (N=15)

OVERALL BONE MARROW
TRANSPLANTATION EPISODES

LABEL	MEAN	CV	SKEWNESS
BMT EPISODE LOS	79.6	68.21	0.86
BMT EPISODE # PROF SVC	530.1	79.46	0.47
BMT EPISODE # RX	0.4	387.30	3.87
GRAND TOTAL BMT EPISODE BILLED	\$291,942	81.10	1.46
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$194,167	87.75	1.31
GRAND TOTAL BMT EPISODE GOVT PAY	\$184,250	94.54	1.24
GRAND TOTAL BMT EPISODE PNT PAY	\$3,583	137.35	2.42
GRAND TOTAL BMT EPISODE PD BOS	\$6,335	387.30	3.87

BONE MARROW TRANSPLANTATION
HOSPITALIZATIONS

TRANSP HOSP LOS	59.3	65.61	1.37
TRANSP HOSP # PROF SVC	232.9	82.01	1.41
TRANSP HOSP # INDEP RX	0	n/a	n/a
TRANSP HOSP TOTAL GOVT PAY	\$153,754	104.03	1.46
TRANSP-TOTAL HOSP GOVT PAY	\$137,053	109.95	1.51
TRANSP HOSP PROF SERV GOVT PAY	\$16,701	73.41	1.46
TRANSP HOSP INDEP DRUGS GOVT PAY	\$0	n/a	n/a

BONE MARROW TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

TRANSP HOSP # AMB PROF SVC	35.6	155.81	1.90
TRANSP HOSP # AMB RX	0	n/a	n/a
TRANSP AMB PROF & DRUGS GOVT PAY	\$2,081	134.04	1.23

NON-TRANSPLANTATION
HOSPITALIZATIONS

NON-TRANSP HOSP # EPISODES	1.7	101.03	0.65
NON-TRANSP HOSP # PROF SVC	169.9	117.69	1.87
NON-TRANSP HOSP # INDEP RX	0.3	387.30	3.87
NON-TRANSP HOSP TOTAL GOVT PAY	\$24,267	124.25	2.36

NON-TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

NON-TRANSP HOSP # AMB PROF SVC	91.7	194.95	2.56
NON-TRANSP HOSP # AMB RX	0.1	387.30	3.87
NON-TRANSP AMB PROF & DRUGS GOVT PAY	\$4,148	171.04	2.24

SUMMARY OF SELECTED CHARGE/PAYMENT/WORKLOAD
TOTAL BONE MARROW TRANSPLANTATION EPISODE
HOSPITAL END DATE: OCTOBER 1988-JULY 1992
TYPE OF BMT=ALLOGENEIC

PNT MORTALITY STATUS: EPISODE DEATH (N=9)

OVERALL BONE MARROW
TRANSPLANTATION EPISODES

LABEL	MEAN	CV	SKEWNESS
BMT EPISODE LOS	114.3	47.35	0.32
BMT EPISODE # PROF SVC	573.3	88.38	2.29
BMT EPISODE # RX	7.0	194.18	2.64
GRAND TOTAL BMT EPISODE BILLED	\$432,183	92.42	1.27
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$278,083	63.13	0.14
GRAND TOTAL BMT EPISODE GOVT PAY	\$246,362	79.67	0.03
GRAND TOTAL BMT EPISODE PNT PAY	\$11,099	131.50	1.86
GRAND TOTAL BMT EPISODE PD BOS	\$20,622	278.91	2.97

BONE MARROW TRANSPLANTATION
HOSPITALIZATIONS

TRANSP HOSP LOS	63.7	64.15	0.60
TRANSP HOSP # PROF SVC	143.7	72.82	0.58
TRANSP HOSP # INDEP RX	0.4	228.10	2.51
TRANSP HOSP TOTAL GOVT PAY	\$131,993	99.99	0.66
TRANSP-TOTAL HOSP GOVT PAY	\$121,872	104.98	0.75
TRANSP HOSP PROF SERV GOVT PAY	\$10,108	66.11	0.30
TRANSP HOSP INDEP DRUGS GOVT PAY	\$13	285.62	2.99

BONE MARROW TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

TRANSP HOSP # AMB PROF SVC	117.3	150.22	1.76
TRANSP HOSP # AMB RX	0.7	300.00	3.00
TRANSP AMB PROF & DRUGS GOVT PAY	\$7,228	125.80	1.68

NON-TRANSPLANTATION
HOSPITALIZATIONS

NON-TRANSP HOSP # EPISODES	4.2	60.12	1.69
NON-TRANSP HOSP # PROF SVC	232.0	113.83	1.76
NON-TRANSP HOSP # INDEP RX	1.7	177.48	2.32
NON-TRANSP HOSP TOTAL GOVT PAY	\$103,178	96.40	1.38

NON-TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

NON-TRANSP HOSP # AMB PROF SVC	80.3	107.96	0.38
NON-TRANSP HOSP # AMB RX	4.2	274.36	2.96
NON-TRANSP AMB PROF & DRUGS GOVT PAY	\$3,964	210.63	2.78

SUMMARY OF SELECTED CHARGE/PAYMENT/WORKLOAD
TOTAL BONE MARROW TRANSPLANTATION EPISODE
HOSPITAL END DATE: OCTOBER 1988-JULY 1992
TYPE OF BMT=ALLOGENEIC

PNT MORTALITY STATUS: EPISODE SURVIVAL (N=86)

OVERALL BONE MARROW
TRANSPLANTATION EPISODES

LABEL	MEAN	CV	SKEWNESS
BMT EPISODE LOS	81.8	86.66	3.61
BMT EPISODE # PROF SVC	557.2	95.98	2.19
BMT EPISODE # RX	24.9	446.56	7.56
GRAND TOTAL BMT EPISODE BILLED	\$225,003	81.61	3.01
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$185,605	69.39	2.22
GRAND TOTAL BMT EPISODE GOVT PAY	\$172,253	76.14	2.09
GRAND TOTAL BMT EPISODE PNT PAY	\$6,321	103.43	1.38
GRAND TOTAL BMT EPISODE PD BOS	\$7,031	475.26	7.10

BONE MARROW TRANSPLANTATION
HOSPITALIZATIONS

TRANSP HOSP LOS	54.2	90.26	4.00
TRANSP HOSP # PROF SVC	195.0	120.20	5.16
TRANSP HOSP # INDEP RX	11.7	761.55	9.07
TRANSP HOSP TOTAL GOVT PAY	\$113,922	95.03	2.28
TRANSP-TOTAL HOSP GOVT PAY	\$98,484	101.51	2.17
TRANSP HOSP PROF SERV GOVT PAY	\$15,312	86.38	2.58
TRANSP HOSP INDEP DRUGS GOVT PAY	\$126	383.03	4.76

BONE MARROW TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

TRANSP HOSP # AMB PROF SVC	65.2	145.03	2.13
TRANSP HOSP # AMB RX	2.2	572.13	8.39
TRANSP AMB PROF & DRUGS GOVT PAY	\$6,597	172.33	3.70

NON-TRANSPLANTATION
HOSPITALIZATIONS

NON-TRANSP HOSP # EPISODES	3.3	109.99	1.65
NON-TRANSP HOSP # PROF SVC	191.5	166.98	2.75
NON-TRANSP HOSP # INDEP RX	4.2	260.77	3.22
NON-TRANSP HOSP TOTAL GOVT PAY	\$43,078	168.71	4.80

NON-TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

NON-TRANSP HOSP # AMB PROF SVC	105.5	181.98	4.10
NON-TRANSP HOSP # AMB RX	6.9	520.96	8.49
NON-TRANSP AMB PROF & DRUGS GOVT PAY	\$8,355	230.49	6.59

SUMMARY OF SELECTED CHARGE/PAYMENT/WORKLOAD
TOTAL BONE MARROW TRANSPLANTATION EPISODE
HOSPITAL END DATE: OCTOBER 1988-JULY 1992
TYPE OF BMT=AUTOLOGOUS

PNT MORTALITY STATUS: TRANSPLANT DEATH (N=10)

OVERALL BONE MARROW
TRANSPLANTATION EPISODES

LABEL	MEAN	CV	SKEWNESS
BMT EPISODE LOS	47.8	66.49	1.37
BMT EPISODE # PROF SVC	145.2	129.02	1.72
BMT EPISODE # RX	4.8	166.32	1.89
GRAND TOTAL BMT EPISODE BILLED	\$121,502	77.74	1.54
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$94,982	104.51	1.05
GRAND TOTAL BMT EPISODE GOVT PAY	\$56,171	164.37	1.99
GRAND TOTAL BMT EPISODE PNT PAY	\$2,604	110.19	1.11
GRAND TOTAL BMT EPISODE PD BOS	\$36,208	195.37	2.28

BONE MARROW TRANSPLANTATION
HOSPITALIZATIONS

TRANSP HOSP LOS	36.5	53.36	0.68
TRANSP HOSP # PROF SVC	77.4	124.42	1.26
TRANSP HOSP # INDEP RX	0.5	316.23	3.16
TRANSP HOSP TOTAL GOVT PAY	\$38,285	155.30	1.71
TRANSP-TOTAL HOSP GOVT PAY	\$33,802	160.66	1.68
TRANSP HOSP PROF SERV GOVT PAY	\$4,467	130.35	1.18
TRANSP HOSP INDEP DRUGS GOVT PAY	\$15	316.23	3.16

BONE MARROW TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

TRANSP HOSP # AMB PROF SVC	17.6	141.30	2.51
TRANSP HOSP # AMB RX	2.8	213.49	2.70
TRANSP AMB PROF & DRUGS GOVT PAY	\$835	124.93	1.66

NON-TRANSPLANTATION
HOSPITALIZATIONS

NON-TRANSP HOSP # EPISODES	1.4	155.04	2.21
NON-TRANSP HOSP # PROF SVC	40.4	279.16	3.15
NON-TRANSP HOSP # INDEP RX	1.5	196.89	1.84
NON-TRANSP HOSP TOTAL GOVT PAY	\$15,756	244.81	3.08

NON-TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

NON-TRANSP HOSP # AMB PROF SVC	9.8	295.15	3.15
NON-TRANSP HOSP # AMB RX	0	n/a	n/a
NON-TRANSP AMB PROF & DRUGS GOVT PAY	\$1,295	312.74	3.16

SUMMARY OF SELECTED CHARGE/PAYMENT/WORKLOAD
TOTAL BONE MARROW TRANSPLANTATION EPISODE
HOSPITAL END DATE: OCTOBER 1988-JULY 1992
TYPE OF BMT=AUTOLOGOUS

PNT MORTALITY STATUS: EPISODE DEATH (N=8)

OVERALL BONE MARROW
TRANSPLANTATION EPISODES

LABEL	MEAN	CV	SKEWNESS
BMT EPISODE LOS	80.6	23.41	0.12
BMT EPISODE # PROF SVC	714.5	41.47	0.66
BMT EPISODE # RX	12.9	148.96	1.27
GRAND TOTAL BMT EPISODE BILLED	\$284,250	67.09	1.80
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$217,860	67.55	1.23
GRAND TOTAL BMT EPISODE GOVT PAY	\$188,908	87.60	1.11
GRAND TOTAL BMT EPISODE PNT PAY	\$6,959	112.23	1.20
GRAND TOTAL BMT EPISODE PD BOS	\$21,992	282.84	2.83

BONE MARROW TRANSPLANTATION
HOSPITALIZATIONS

TRANSP HOSP LOS	44.6	26.62	2.12
TRANSP HOSP # PROF SVC	135.9	54.93	0.16
TRANSP HOSP # INDEP RX	0.4	198.41	1.95
TRANSP HOSP TOTAL GOVT PAY	\$97,306	112.10	1.19
TRANSP-TOTAL HOSP GOVT PAY	\$83,630	124.53	1.11
TRANSP HOSP PROF SERV GOVT PAY	\$13,640	81.41	0.99
TRANSP HOSP INDEP DRUGS GOVT PAY	\$36	224.92	2.52

BONE MARROW TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

TRANSP HOSP # AMB PROF SVC	66.1	87.22	0.47
TRANSP HOSP # AMB RX	2.3	155.83	1.50
TRANSP AMB PROF & DRUGS GOVT PAY	\$7,981	168.43	2.07

NON-TRANSPLANTATION
HOSPITALIZATIONS

NON-TRANSP HOSP # EPISODES	5.6	59.30	0.16
NON-TRANSP HOSP # PROF SVC	344.1	73.00	0.54
NON-TRANSP HOSP # INDEP RX	4.3	195.55	1.86
NON-TRANSP HOSP TOTAL GOVT PAY	\$71,019	70.10	0.14

NON-TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

NON-TRANSP HOSP # AMB PROF SVC	168.4	118.95	1.62
NON-TRANSP HOSP # AMB RX	5.9	176.29	1.67
NON-TRANSP AMB PROF & DRUGS GOVT PAY	\$12,603	114.77	1.29

SUMMARY OF SELECTED CHARGE/PAYMENT/WORKLOAD
TOTAL BONE MARROW TRANSPLANTATION EPISODE
HOSPITAL END DATE: OCTOBER 1988-JULY 1992
TYPE OF BMT=AUTOLOGOUS

PNT MORTALITY STATUS: EPISODE SURVIVAL (N=63)

OVERALL BONE MARROW
TRANSPLANTATION EPISODES

LABEL	MEAN	CV	SKEWNESS
BMT EPISODE LOS	73.7	63.02	2.17
BMT EPISODE # PROF SVC	499.3	107.14	2.13
BMT EPISODE # RX	8.6	257.84	4.07
GRAND TOTAL BMT EPISODE BILLED	\$206,527	55.76	1.10
GRAND TOTAL BMT EPISODE ALL PAYMENTS	\$163,719	57.19	0.46
GRAND TOTAL BMT EPISODE GOVT PAY	\$124,911	84.83	0.48
GRAND TOTAL BMT EPISODE PNT PAY	\$8,487	215.69	4.90
GRAND TOTAL BMT EPISODE PD BOS	\$30,321	226.07	2.90

BONE MARROW TRANSPLANTATION
HOSPITALIZATIONS

TRANSP HOSP LOS	49.3	62.17	2.04
TRANSP HOSP # PROF SVC	137.7	101.60	1.60
TRANSP HOSP # INDEP RX	1.8	263.46	2.95
TRANSP HOSP TOTAL GOVT PAY	\$75,928	95.65	0.86
TRANSP-TOTAL HOSP GOVT PAY	\$67,881	99.44	0.95
TRANSP HOSP PROF SERV GOVT PAY	\$8,008	95.42	1.32
TRANSP HOSP INDEP DRUGS GOVT PAY	\$39	430.89	6.50

BONE MARROW TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

TRANSP HOSP # AMB PROF SVC	79.7	173.55	3.35
TRANSP HOSP # AMB RX	1.1	329.59	4.43
TRANSP AMB PROF & DRUGS GOVT PAY	\$5,010	174.95	2.91

NON-TRANSPLANTATION
HOSPITALIZATIONS

NON-TRANSP HOSP # EPISODES	3.9	99.45	1.51
NON-TRANSP HOSP # PROF SVC	173.7	143.08	1.97
NON-TRANSP HOSP # INDEP RX	4.0	328.68	5.43
NON-TRANSP HOSP TOTAL GOVT PAY	\$37,821	150.78	2.92

NON-TRANSPLANTATION
HOSPITALIZATION AMBULATORY SERVICES

NON-TRANSP HOSP # AMB PROF SVC	108.2	238.10	4.83
NON-TRANSP HOSP # AMB RX	1.8	204.77	3.00
NON-TRANSP AMB PROF & DRUGS GOVT PAY	\$6,151	204.77	3.00

APPENDIX B

DEPARTMENT OF DEFENSE CHAMPUS

ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS

TOTAL PATIENT TREATMENT EPISODES

INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS

HOSPITAL END DATE: OCTOBER 1988-JULY 1992

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

HOSP PROVIDER ID NUM NAME	TRANSF HOSP DIAG CODE	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP PROF CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)
191 VANDERBILT UNIV HOSPITAL	03842	E COLI SEPTICEMIA	2849	APLASTIC ANEMIA NOS
122 DUKE MEDICAL CTR	2792	COMBINED IMMUNITY DEFIC		
166 CHILDRENS HOSPITAL	2849	APLASTIC ANEMIA NOS	2040	ACUTE LYMPHOID LEUKEMIA
85 SWEDISH MEDICAL CTR	2849	APLASTIC ANEMIA NOS	V593	BONE MARROW DONOR
180 UNIV OF MINN HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	2051	CHRONIC MYELOID LEUKEMIA
56 PENROSE ST FRANCIS HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	78609	RESPIRATORY ABNORM NEC
114 UNIV OF MINN HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	7833	FEEDING PROBLEM
209 UCLA MEDICAL CTR	2050	ACUTE MYELOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
75 BAYLOR UNIV MEDICAL CTR	20198	HODGKINS DIS NOS MULT	20190	HODGKINS NOS-EXTRNOD/NOS
6 MEMORIAL HOSPITAL FOR CANCER	2848	APLASTIC ANEMIAS NEC	2849	APLASTIC ANEMIA NOS
101 YALE NEW HAVEN HOSPITAL	2060	ACUTE MONOCYTIC LEUKEMIA	2050	ACUTE MYELOID LEUKEMIA
29 ST MARYS HOSPITAL	0381	STAPHYLOCOCC SEPTICEMIA	7908	VIREMIA NOS

STATUS

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID ID NUM	TRANSP # EPISODES	HOSP REFERRAL	WHMC END DATE	HOSP END DATE	BMT REJECTION DIAG	CHAMPUS DATE OF DEATH	PREVIOUS		TRANSF		BMT EPISODE LOS	GRAND TOTAL		GRAND TOTAL		GRAND TOTAL BMT EPISODE GOVT PAY*
							BMT HOSP ID	TRANSF NUM	HOSP LOS	BMT EPISODE LOS		BMT EPISODE ALL BILLINGS*	BMT EPISODE ALL PAYMENTS*			
191	1	NONE	25NOV88	NONE	30OCT91	NONE	NONE	327.0	512.0	\$620,534	\$282,395	\$280,302				
122	1	REFERRED	11JUL89	NONE	ALIVE	NONE	NONE	141.0	141.0	\$169,844	\$169,172	\$169,048				
166	1	NONE	20JAN89	NONE	ALIVE	NONE	NONE	75.0	75.0	\$109,817	\$139,640	\$136,273				
85	1	REFERRED	15NOV88	NONE	ALIVE	NONE	NONE	34.0	54.0	\$116,857	\$130,717	\$121,360				
180	1	NONE	22JUN89	NONE	ALIVE	NONE	NONE	42.0	100.0	\$155,858	\$118,735	\$116,084				
56	1	NONE	26APR89	NONE	19JUL90	NONE	NONE	43.0	53.0	\$84,549	\$106,763	\$5,447				
114	1	NONE	05MAR89	NONE	ALIVE	NONE	NONE	34.0	35.0	\$73,066	\$88,768	\$88,028				
209	1	REFERRED	25DEC88	NONE	ALIVE	NONE	NONE	34.0	34.0	\$100,250	\$82,175	\$79,439				
75	1	NONE	05JUN89	NONE	ALIVE	NONE	NONE	42.0	67.0	\$162,965	\$81,324	\$67,768				
6	1	NONE	10JUL89	NONE	ALIVE	NONE	NONE	22.0	22.0	\$59,930	\$73,668	\$63,172				
101	1	NONE	18AUG89	NONE	ALIVE	NONE	NONE	44.0	58.0	\$97,780	\$48,505	\$46,003				
29	1	NONE	13JUN89	NONE	ALIVE	NONE	NONE	5.0	18.0	\$20,548	\$19,015	\$8,370				
											\$1,771,998	\$1,340,877	\$1,181,294			

12

STATUS

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	GRAND TOTAL BMT EPISODE PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANSBOSP ALL PAYMENTS*	TRANSBOSP TOTAL GOVT PAY	TRANSBOSP HOSP GOVT PAY	TRANSBOSP HOSP PNT PAY	TRANSBOSP HOSP PD BOS	TRANSBOSP HOSP INDEP RX	TRANSBOSP HOSP INDEP DRUGS	TRANSBOSP HOSP GOVT PAY
191	\$2,093	\$0	\$113,601	\$113,523	\$91,382	\$0	\$0	4	\$15	
122	\$124	\$0	\$169,172	\$169,048	\$168,794	\$0	\$0	0	\$0	
166	\$3,367	\$0	\$131,182	\$129,494	\$100,598	\$0	\$0	0	\$0	
85	\$9,357	\$0	\$92,442	\$90,606	\$77,305	\$0	\$0	0	\$0	
180	\$2,651	\$0	\$60,950	\$59,684	\$26,070	\$0	\$0	0	\$0	
56	\$14,907	\$86,409	\$61,940	\$679	\$0	\$0	\$57,970	0	\$0	
114	\$740	\$0	\$76,461	\$76,461	\$64,499	\$0	\$0	0	\$0	
209	\$2,736	\$0	\$82,175	\$79,439	\$55,435	\$0	\$0	0	\$0	
75	\$13,556	\$0	\$41,275	\$39,362	\$33,323	\$0	\$0	0	\$0	
6	\$10,496	\$0	\$73,668	\$63,172	\$47,358	\$0	\$0	0	\$0	
101	\$2,502	\$0	\$18,038	\$17,228	\$11,499	\$0	\$0	0	\$0	
29	\$1,364	\$9,281	\$3,646	\$452	\$407	\$0	\$2,959	0	\$0	
STATUS	\$63,893	\$95,690	\$924,550	\$839,148	\$676,670	\$0	\$60,929	4	\$15	

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSB, NON-TRANSB, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	TRANS INDEP DRUGS PNT PAY	TRANS HOSP INDEP DRUGS PD BOS	TRANS HOSP # PROF SVC	TRANS HOSP PROF SERV GOVT PAY	TRANS HOSP PROF SERV PNT PAY	TRANS HOSP PROF SERV PD BOS	TRANS HOSP # AMB PROF SVC	TRANS HOSP # AMB RX	TRANS AMB PROF & DRUGS GOVT PAY
191	\$3	\$0	293	\$22,126	\$75	\$0	0	0	\$0
122	\$0	\$0	6	\$254	\$124	\$0	0	0	\$0
166	\$0	\$0	1,921	\$28,896	\$1,688	\$0	24	0	\$6,779
85	\$0	\$0	98	\$13,301	\$1,836	\$0	0	0	\$0
180	\$0	\$0	256	\$33,614	\$1,266	\$0	24	0	\$1,386
56	\$0	\$0	72	\$679	\$0	\$3,291	89	0	\$103
114	\$0	\$0	86	\$11,962	\$0	\$0	2	0	\$81
209	\$0	\$0	80	\$24,004	\$2,736	\$0	0	0	\$0
75	\$0	\$0	84	\$6,039	\$1,913	\$0	33	0	\$3,717
6	\$0	\$0	171	\$15,814	\$10,496	\$0	0	0	\$0
101	\$0	\$0	67	\$5,729	\$810	\$0	20	0	\$1,265
29	\$0	\$0	6	\$45	\$0	\$235	58	0	\$2,284
STATUS	\$3	\$0	3,140	\$162,463	\$20,944	\$3,526	250	0	\$15,615

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANS, NON-TRANS, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

ID NUM	TRANSF AMB		TRANSF AMB		NON-TRANSF HOSP # EPISODES	NON-TRANSF HOSP # DAYS	NON-TRANSF HOSP # PROF SVC	NON-TRANSF HOSP # INDEP RX	NON-TRANSF HOSP TOTAL GOVT PAY	NON-TRANSF HOSP TOTAL PNT PAY	NON-TRANSF HOSP TOTAL PD BOS
	PROF & DRUGS PNT PAY	PD BOS	PROF & DRUGS PD BOS	PD BOS							
191	\$3	\$0	\$0	\$0	13	185	749	29	\$160,576	\$798	\$0
122	\$0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
166	\$1,679	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
85	\$0	\$0	\$0	\$0	2	20	82	0	\$21,198	\$2,570	\$0
180	\$38	\$0	\$0	\$0	9	58	412	0	\$50,049	\$713	\$0
56	\$0	\$3,831	\$0	\$0	2	10	25	0	\$3,866	\$14,902	\$15,506
114	\$11	\$0	\$0	\$0	1	1	30	0	\$10,329	\$698	\$0
209	\$0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
75	\$1,407	\$0	\$0	\$0	3	25	117	0	\$18,353	\$8,046	\$0
6	\$0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
101	\$356	\$0	\$0	\$0	3	14	44	1	\$18,887	\$595	\$0
29	\$385	\$4,410	\$0	\$0	3	13	8	0	\$5,634	\$979	\$1,677
STATUS	\$3,879	\$8,241			36	326	1,467	29	\$288,892	\$29,301	\$17,183

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	NON-TRANSP HOSP # AMB PROF SVC	NON-TRANSP HOSP # AMB RX	NON-TRANSP AMB PROF & DRUGS GOVT PAY	NON-TRANSP AMB PROF & DRUGS PNT PAY	NON-TRANSP AMB PROF & DRUGS PD BOS
191	240	6	\$6,203	\$1,214	\$0
122	0	0	\$0	\$0	\$0
166	0	0	\$0	\$0	\$0
85	88	0	\$9,556	\$4,951	\$0
180	62	0	\$4,965	\$634	\$0
56	214	0	\$799	\$5	\$5,811
114	17	0	\$1,157	\$31	\$0
209	0	0	\$0	\$0	\$0
75	85	0	\$6,336	\$2,190	\$0
6	0	0	\$0	\$0	\$0
101	118	0	\$8,623	\$741	\$0
29	0	0	\$0	\$0	\$0
STATUS	824	6	\$37,639	\$9,766	\$5,811

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED
DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANS,
AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

[illegible]

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=TRANSPLANT DEATH -----

HOSP PROVIDER ID NUM NAME	TRANSPLANT HOSP CODE	TRANSPLANT DIAG NAME (SHORT)	TRANSPLANT TOP PROF CODE (IF DIFF)	TRANSPLANT TOP PROF NAME (SHORT)
137 COOK FT WORTH CHLD MED CTR	03843	PSEUDOMONAS SEPTICEMIA	2050	ACUTE MYELOID LEUKEMIA
25 UNIV OF KANSAS MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	5990	URIN TRACT INFECTION NOS

STATUS
YEAR

HOSP ID NUM	TRANSPLANT HOSP CODE	TRANSPLANT DIAG NAME (SHORT)	TRANSPLANT TOP PROF CODE (IF DIFF)	TRANSPLANT TOP PROF NAME (SHORT)
137	1	NONE	27APR89	NONE
25	1	REFERRED 15DEC88	NONE	NONE
STATUS	2			
YEAR	15			

HOSP ID NUM	TRANSPLANT HOSP CODE	TRANSPLANT DIAG NAME (SHORT)	TRANSPLANT TOP PROF CODE (IF DIFF)	TRANSPLANT TOP PROF NAME (SHORT)
137	1	NONE	27APR89	NONE
25	1	REFERRED 15DEC88	NONE	NONE
STATUS	2			
YEAR	15			

HOSP ID NUM	TRANSPLANT HOSP CODE	TRANSPLANT DIAG NAME (SHORT)	TRANSPLANT TOP PROF CODE (IF DIFF)	TRANSPLANT TOP PROF NAME (SHORT)
137	1	NONE	27APR89	NONE
25	1	REFERRED 15DEC88	NONE	NONE
STATUS	2			
YEAR	15			

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PATIENTS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PATIENTS: TRANSPL, NON-TRANSPL, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=TRANSPLANT DEATH -----

(continued)

HOSP ID NUM	TRANSF AMB PROF & DRUGS PNT PAY	TRANSF AMB PROF & DRUGS PD BOS	NON-TRANSF HOSP # EPISODES	NON-TRANSF HOSP # DAYS	NON-TRANSF HOSP # PROF SVC	NON-TRANSF HOSP # INDEP RX	NON-TRANSF HOSP TOTAL GOVT PAY	NON-TRANSF HOSP TOTAL PNT PAY	NON-TRANSF HOSP TOTAL PD BOS
137	\$39	\$0	5	47	272	0	\$26,374	\$119	\$0
25	\$70	\$0	0	0	0	0	\$0	\$0	\$0
STATUS YEAR	\$109 \$3,988	\$0 \$8,241	5 44	47 409	272 1,821	0 29	\$26,374 \$351,272	\$119 \$37,446	\$0 \$17,183

HOSP ID NUM	NON-TRANSF HOSP # AMB PROF SVC	NON-TRANSF HOSP PROF & DRUGS GOVT PAY	NON-TRANSF HOSP PROF & DRUGS PNT PAY	NON-TRANSF HOSP PROF & DRUGS PD BOS
137	6	\$152	\$17	\$0
25	0	\$0	\$0	\$0
STATUS YEAR	6 854	\$152 \$38,175	\$17 \$9,961	\$0 \$5,811

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

HOSP PROVIDER ID NUM NAME	TRANSF HOSP DIAG CODE	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP PROF CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)
124 SHANDS HOSPITAL	1940	MALIGN NEOPL ADRENAL	1600	MAL NEO NASAL CAVITIES
203 SWEDISH MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	V718	OBSERV-SUSPECT COND NEC
149 UNIV OF MINN HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
139 FRED HUTCHINSON CANCER CTR	2050	ACUTE MYELOID LEUKEMIA	2060	ACUTE MONOCYTIC LEUKEMIA
105 SHANDS HOSPITAL	20288	LYMPHOMAS NEC MULT	20080	MIX LYMPHSAR-EXTRNOD/NOS
187 UCLA MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	2080	ACUTE LEUKEMIA NOS
188 UNIV OF MINN HOSPITAL	2080	ACUTE LEUKEMIA NOS	2060	ACUTE MONOCYTIC LEUKEMIA
206 CHILDRENS HOSPITAL	20480	LYMPHOID LEUKEMIA NEC	2040	ACUTE LYMPHOID LEUKEMIA
115 CHILDRENS HOSPITAL	2840	CONGEN APLASTIC ANEMIA	2849	APLASTIC ANEMIA NOS
141 SWEDISH MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	2899	BLOOD DISEASE NOS
77 YALE NEW HAVEN HOSPITAL	20011	LYMPHOSARCOMA HEAD	20280	LYMPHOMA NEC-EXTRNOD/NOS
183 UNIV OF MINN HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	V428	TRANSPLANT STATUS NEC
216 ST JOHNS MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
219 FRED HUTCHINSON CANCER CTR	2040	ACUTE LYMPHOID LEUKEMIA		
179 SWEDISH MEDICAL CTR	2080	ACUTE LEUKEMIA NOS	2050	ACUTE MYELOID LEUKEMIA
60 UNIV OF VA HOSPITAL	2849	APLASTIC ANEMIA NOS	2840	CONGEN APLASTIC ANEMIA
27 UCLA MEDICAL CTR	2050	ACUTE MYELOID LEUKEMIA	4280	CONGESTIVE HEART FAILURE
72 FRED HUTCHINSON CANCER CTR	2051	CHRONIC MYELOID LEUKEMIA		
165 COOK FT WORTH CHLD MED CTR	2060	ACUTE MONOCYTIC LEUKEMIA	2050	ACUTE MYELOID LEUKEMIA
13 GRACE HOSPITAL	2051	CHRONIC MYELOID LEUKEMIA	V428	TRANSPLANT STATUS NEC
39 GOOD SAMARITAN HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	2080	ACUTE LEUKEMIA NOS
42 SENTARA LEIGH HOSPITAL	2051	CHRONIC MYELOID LEUKEMIA	2050	ACUTE MYELOID LEUKEMIA
95 GOOD SAMARITAN MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	20280	LYMPHOMA NEC-EXTRNOD/NOS
162 VANDERBILT UNIV HOSPITAL	1940	MALIGN NEOPL ADRENAL	1929	MAL NEO NERVOUS SYST NOS
14 UNIV OF WISCONSIN HOSPITAL	2849	APLASTIC ANEMIA NOS	7806	PYREXIA UNKNOWN ORIGIN

STATUS

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	TRANS #	HOSP EPISODES	WHMC REFERRAL	HOSP END DATE	BMT REJECTION	CHAMPUS DATE OF BMT	PREVIOUS HOSP ID	TRANS HOSP	BMT LOS	GRAND TOTAL BMT EPISODE ALL BILLINGS*	GRAND TOTAL BMT EPISODE ALL PAYMENTS*	GRAND TOTAL BMT EPISODE GOVT PAY*
124	1	1	NONE	25JAN90	NONE	ALIVE	NONE	45.0	314.0	\$1,148,317	\$636,485	\$617,713
203	1	1	NONE	27AUG90	SEC HOSP	ALIVE	NONE	40.0	77.0	\$355,338	\$406,961	\$400,906
149	1	1	NONE	18APR90	NONE	ALIVE	NONE	111.0	153.0	\$355,395	\$318,831	\$317,943
139	1	1	NONE	04MAR90	SEC HOSP	ALIVE	NONE	84.0	92.0	\$284,877	\$225,130	\$220,969
105	1	1	NONE	02MAY90	NONE	ALIVE	NONE	86.0	142.0	\$346,785	\$219,609	\$217,013
187	1	1	NONE	21MAY90	NONE	ALIVE	NONE	42.0	59.0	\$222,198	\$216,618	\$209,907
188	1	1	NONE	04MAR90	NONE	ALIVE	NONE	58.0	133.0	\$245,302	\$214,624	\$201,550
206	1	1	NONE	13AUG90	NONE	ALIVE	NONE	50.0	50.0	\$161,712	\$188,480	\$188,097
115	1	1	REFERRED	16MAR90	SEC HOSP	ALIVE	NONE	30.0	64.0	\$134,871	\$176,379	\$149,908
141	1	1	NONE	30OCT89	NONE	ALIVE	NONE	47.0	61.0	\$135,851	\$167,844	\$165,125
77	1	1	NONE	13FEB90	NONE	ALIVE	NONE	48.0	59.0	\$131,223	\$167,774	\$157,815
183	1	1	NONE	11AUG90	NONE	ALIVE	NONE	54.0	54.0	\$137,728	\$157,803	\$157,210
216	1	1	NONE	10MAY90	NONE	ALIVE	NONE	22.0	50.0	\$203,530	\$145,663	\$144,626
219	1	1	REFERRED	28AUG90	NONE	ALIVE	NONE	34.0	39.0	\$104,398	\$138,015	\$135,290
179	1	1	NONE	14NOV89	SEC HOSP	ALIVE	NONE	36.0	114.0	\$193,096	\$134,884	\$122,978
60	1	1	NONE	27MAR90	SEC HOSP	ALIVE	NONE	37.0	185.0	\$673,219	\$130,690	\$128,698
27	1	1	NONE	10MAR90	NONE	ALIVE	NONE	26.0	58.0	\$211,999	\$112,409	\$106,018
72	1	1	NONE	24JUL90	NONE	ALIVE	NONE	40.0	60.0	\$358,989	\$103,233	\$97,955
165	1	1	NONE	18OCT89	NONE	ALIVE	NONE	33.0	52.0	\$105,196	\$93,202	\$81,563
13	1	1	NONE	21MAY90	NONE	ALIVE	NONE	29.0	39.0	\$120,972	\$89,399	\$84,052
39	1	1	NONE	20JUL90	NONE	ALIVE	NONE	46.0	56.0	\$91,049	\$87,963	\$60,271
42	1	1	NONE	20OCT89	NONE	ALIVE	NONE	42.0	55.0	\$179,998	\$82,828	\$80,339
95	1	1	NONE	29SEP90	NONE	ALIVE	NONE	36.0	56.0	\$93,453	\$65,349	\$2,207
162	1	1	NONE	02FEB90	NONE	ALIVE	NONE	42.0	53.0	\$95,841	\$46,956	\$45,026
14	1	1	REFERRED	23JUN90	NONE	ALIVE	NONE	46.0	46.0	\$102,900	\$26,592	\$24,892
											-----	-----
STATUS											\$6,194,237	\$4,353,721
											-----	\$4,118,071

25

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	GRAND TOTAL BMT EPISODE PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANSF HOSP ALL PAYMENTS*	TRANSF HOSP TOTAL GOVT PAY	TRANSF HOSP INST GOVT PAY	TRANSF HOSP INST PNT PAY	TRANSF HOSP INST PD BOS	TRANSF HOSP # INDEP RX	TRANSF HOSP INDEP RX GOVT PAY	TRANSF HOSP INDEP RX GOVT PAY
124	\$18,772	\$0	\$33,861	\$32,526	\$23,671	\$0	\$0	0	\$0	\$0
203	\$6,055	\$0	\$110,404	\$110,336	\$96,870	\$0	\$0	0	\$0	\$0
149	\$888	\$0	\$282,580	\$282,035	\$277,045	\$0	\$0	0	\$0	\$0
139	\$4,161	\$0	\$201,844	\$198,167	\$179,183	\$0	\$0	0	\$0	\$0
105	\$2,596	\$0	\$87,006	\$86,866	\$71,661	\$0	\$0	24	\$472	\$472
187	\$6,711	\$0	\$193,583	\$189,577	\$178,403	\$0	\$0	0	\$0	\$0
188	\$13,074	\$0	\$129,549	\$128,448	\$118,401	\$0	\$0	0	\$0	\$0
206	\$383	\$0	\$170,395	\$170,299	\$141,188	\$0	\$0	99	\$16	\$16
115	\$13,214	\$13,257	\$78,718	\$77,871	\$67,894	\$0	\$0	0	\$0	\$0
141	\$2,719	\$0	\$120,895	\$120,409	\$106,736	\$0	\$0	0	\$0	\$0
77	\$9,959	\$0	\$19,310	\$18,945	\$15,178	\$0	\$0	0	\$0	\$0
183	\$593	\$0	\$155,001	\$155,001	\$134,518	\$0	\$0	0	\$0	\$0
216	\$1,037	\$0	\$42,300	\$42,052	\$34,516	\$0	\$0	0	\$0	\$0
219	\$2,725	\$0	\$104,259	\$103,487	\$84,991	\$0	\$0	0	\$0	\$0
179	\$11,906	\$0	\$23,217	\$21,027	\$13,583	\$0	\$0	0	\$0	\$0
60	\$1,992	\$0	\$24,264	\$24,168	\$22,457	\$0	\$0	7	\$113	\$113
27	\$6,391	\$0	\$54,596	\$52,974	\$46,353	\$0	\$0	0	\$0	\$0
72	\$5,278	\$0	\$68,065	\$64,493	\$56,609	\$0	\$0	0	\$0	\$0
165	\$4,875	\$6,764	\$71,235	\$65,273	\$52,522	\$0	\$2,310	1	\$3,082	\$3,082
13	\$5,347	\$0	\$41,997	\$40,928	\$17,574	\$0	\$0	13	\$913	\$913
39	\$11,869	\$15,823	\$35,247	\$34,703	\$26,497	\$0	\$0	0	\$0	\$0
42	\$2,489	\$0	\$39,513	\$38,610	\$28,197	\$0	\$0	7	\$127	\$127
95	\$22,031	\$41,111	\$27,419	\$648	\$0	\$0	\$23,753	0	\$0	\$0
162	\$1,930	\$0	\$21,307	\$21,194	\$16,696	\$0	\$0	0	\$0	\$0
14	\$1,304	\$396	\$19,565	\$18,169	\$14,591	\$0	\$0	0	\$0	\$0
STATUS	\$158,299	\$77,351	\$2,156,130	\$2,098,206	\$1,825,334	\$0	\$26,063	151	\$4,723	\$4,723

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED
DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF,
AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL
(continued)

ID	HOSP	TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS PD BOS	TRANSF HOSP INDEP DRUGS # PROF SVC	TRANSF HOSP PROF SERV		TRANSF HOSP PROF SERV PD BOS	TRANSF HOSP # AMB	TRANSF HOSP # AMB RX	TRANSF HOSP PROF & DRUGS	
		PNT PAY	GOVT PAY			PNT PAY	GOVT PAY				PROF PAY	GOVT PAY
124		\$0	\$8,855	\$1,335		\$0	2		0		\$22	
203		\$0	\$13,466	\$68		\$0	38		1		\$12,628	
149		\$0	\$4,990	\$545		\$0	0		0		\$0	
139		\$0	\$18,984	\$3,677		\$0	18		0		\$4,191	
105		\$60	\$14,733	\$80		\$0	83		19		\$3,550	
187		\$0	\$11,174	\$4,006		\$0	22		0		\$6,182	
188		\$0	\$10,047	\$1,101		\$0	3		0		\$36	
206		\$0	\$29,095	\$96		\$0	134		0		\$17,798	
115		\$0	\$9,977	\$320		\$527	97		13		\$7,040	
141		\$0	\$13,673	\$486		\$0	0		0		\$0	
77		\$0	\$3,767	\$365		\$0	20		0		\$2,105	
183		\$0	\$20,483	\$248		\$0	11		0		\$2,209	
216		\$0	\$7,536	\$772		\$0	0		0		\$0	
219		\$0	\$18,496	\$2,190		\$0	52		0		\$2,789	
179		\$0	\$7,444	\$2,190		\$0	71		0		\$8,934	
60		\$87	\$1,598	\$9		\$0	3		1		\$100	
27		\$0	\$6,621	\$1,622		\$0	5		0		\$648	
72		\$0	\$7,884	\$3,572		\$0	6		0		\$461	
165		\$678	\$9,669	\$700		\$2,274	72		1		\$3,046	
13		\$0	\$22,441	\$1,069		\$0	8		2		\$209	
39		\$0	\$8,206	\$544		\$0	0		0		\$0	
42		\$32	\$10,286	\$871		\$0	20		2		\$437	
95		\$0	\$648	\$0		\$3,018	0		0		\$0	
162		\$0	\$4,498	\$113		\$0	0		0		\$0	
14		\$0	\$3,578	\$1,000		\$396	19		0		\$6,723	

STATUS		\$857	\$268,149	\$24,789		\$6,215	684		39		\$79,108	

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL												
(continued)												
HOSP ID	NUM	AMB	PROF	DRUGS	TRANSF	NON-TRANSF	NON-TRANSF	NON-TRANSF	NON-TRANSF	NON-TRANSF	NON-TRANSF	NON-TRANSF
		PNT		PD	#	#	#	#	#	#	#	PD
		PAY		BOS	EPISODES	DAYS	PROF	HOSP	INDEP	HOSP	PAY	BOS
124		\$0		\$0	18	269	1,477	28			\$571,440	\$0
203		\$0		\$0	6	37	248	0			\$113,213	\$0
149		\$0		\$0	3	42	0	0			\$35,172	\$0
139		\$274		\$0	1	8	54	0			\$9,570	\$0
105		\$93		\$0	12	56	613	64			\$112,143	\$0
187		\$149		\$0	1	17	129	0			\$13,416	\$0
188		\$6		\$0	6	75	280	4			\$69,162	\$0
206		\$287		\$0	0	0	0	0			\$0	\$0
115		\$0		\$0	7	34	392	2			\$60,280	\$12,730
141		\$0		\$0	6	14	148	0			\$42,179	\$0
77		\$178		\$0	4	11	57	20			\$126,124	\$0
183		\$593		\$0	0	0	0	0			\$0	\$0
216		\$0		\$0	2	28	112	0			\$94,220	\$0
219		\$795		\$0	1	5	45	0			\$22,131	\$0
179		\$2,041		\$0	4	78	532	0			\$89,787	\$0
60		\$100		\$0	4	148	81	9			\$102,839	\$0
27		\$235		\$0	2	32	71	0			\$48,206	\$0
72		\$386		\$0	2	20	494	0			\$29,885	\$0
165		\$872		\$0	4	19	67	0			\$11,017	\$2,180
13		\$114		\$0	4	10	67	23			\$18,737	\$0
39		\$0		\$0	7	10	190	25			\$15,615	\$0
42		\$76		\$0	3	13	115	42			\$28,925	\$6,684
95		\$0		\$0	3	20	18	0			\$1,332	\$0
162		\$0		\$0	5	11	138	0			\$22,031	\$14,272
14		\$304		\$0	0	0	0	0			\$15,841	\$0
											\$0	\$0
STATUS		\$6,503		\$0	105	957	5,328	217			\$1,631,404	\$35,866

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	NON-TRANSP # AMB PROF SVC	NON-TRANSP HOSP # AMB RX	NON-TRANSP AMB PROF & DRUGS GOVT PAY	NON-TRANSP AMB PROF & DRUGS PNT PAY	NON-TRANSP AMB PROF & DRUGS PD BOS
124	236	5	\$13,725	\$230	\$0
203	446	0	\$164,729	\$4,258	\$0
149	11	0	\$736	\$5	\$0
139	17	0	\$9,041	\$52	\$0
105	323	36	\$14,454	\$978	\$0
187	30	0	\$732	\$879	\$0
188	75	0	\$3,904	\$389	\$0
206	0	0	\$0	\$0	\$0
115	158	6	\$4,717	\$567	\$0
141	32	0	\$2,537	\$517	\$0
77	137	34	\$10,641	\$3,778	\$0
183	0	0	\$0	\$0	\$0
216	65	324	\$8,354	\$647	\$0
219	68	0	\$6,883	\$921	\$0
179	60	0	\$3,230	\$703	\$0
60	45	11	\$1,591	\$482	\$0
27	39	2	\$4,190	\$1,871	\$0
72	75	0	\$3,116	\$1,081	\$0
165	17	0	\$2,227	\$276	\$0
13	94	33	\$24,178	\$2,182	\$0
39	414	41	\$9,953	\$733	\$9,139
42	116	25	\$12,367	\$178	\$0
95	3	0	\$57	\$0	\$68
162	203	0	\$7,991	\$1,554	\$0
14	0	0	\$0	\$0	\$0
STATUS	2,664	517	\$309,353	\$22,281	\$9,207

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANS, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE DEATH -----

HOSP PROVIDER ID NUM NAME	TRANSB HOSP DIAG CODE	TRANSB HOSP DIAG NAME (SHORT)	TRANSB HOSP TOP PROF CODE (IF DIFF)	TRANSB HOSP TOP PROF NAME (SHORT)
8 EMORY UNIV HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
159 OK STATE UNIV HOSPITAL	20021	BURKITT'S TUMOR HEAD	20020	BURKITT'S TUM-EXTRND/NOS

STATUS

HOSP TRANSB HOSP ID NUM # EPISODES	WHMC REFERRAL	HOSP END DATE	BMT REJECTION DIAG	CHAMPUS DATE OF BMT DEATH	PREVIOUS HOSP ID NUM	TRANSB HOSP LOS	BMT EPISODE LOS	GRAND TOTAL BMT EPISODE ALL BILLINGS*	GRAND TOTAL BMT EPISODE ALL PAYMENTS*	GRAND TOTAL BMT EPISODE GOVT PAY*
8	1	NONE	08OCT89	NONE	69.0	124.0	\$242,514	\$136,872	\$80,506	
159	1	NONE	22OCT89	NONE	5.0	37.0	\$45,627	\$46,597	\$45,431	
STATUS	2						\$288,141	\$183,469	\$125,937	

HOSP BMT EPISODE ID NUM PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANSB HOSP ALL PAYMENTS*	TRANSB HOSP TOTAL GOVT PAY	TRANSB HOSP HOSP INST GOVT PAY	TRANSB HOSP HOSP INST PNT PAY	TRANSB HOSP HOSP INST PD BOS	TRANSB HOSP HOSP INST # INDEP RX	TRANSB HOSP HOSP INST GOVT PAY
8	\$44,403	\$11,963	\$51,644	\$40,081	\$0	\$4,095	0	\$0
159	\$1,166	\$0	\$13,212	\$8,688	\$0	\$0	0	\$0
STATUS	\$45,569	\$11,963	\$64,856	\$48,769	\$0	\$4,095	0	\$0

HOSP INDEP DRUGS ID NUM PNT PAY	TRANSB HOSP INDEP DRUGS PD BOS	TRANSB HOSP PROF SVC # PROF SVC	TRANSB HOSP PROF SVC PNT PAY	TRANSB HOSP PROF SVC PD BOS	TRANSB HOSP PROF SVC # AMB	TRANSB HOSP PROF & DRUGS GOVT PAY
8	\$0	127	\$3,774	\$3,619	194	\$11,663
159	\$0	28	\$3,844	\$680	22	\$2,545
STATUS	\$0	155	\$7,618	\$4,299	216	\$14,208

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANS, NON-TRANS, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE DEATH -----
(continued)

HOSP ID	NUM	TRANSP AMB PROF & DRUGS PNT PAY	TRANSP AMB PROF & DRUGS PD BOS	NON-TRANSP HOSP # EPISODES	NON-TRANSP HOSP # DAYS	NON-TRANSP HOSP # PROF SVC	NON-TRANSP HOSP # INDEP RX	NON-TRANSP HOSP TOTAL GOVT PAY	NON-TRANSP HOSP TOTAL PNT PAY	NON-TRANSP HOSP TOTAL PD BOS
8	159	\$1,170 \$16	\$0 \$0	5 4	55 32	6 93	3 0	\$24,785 \$30,354	\$39,390 \$470	\$7,793 \$0
STATUS		\$1,186	\$0	9	87	99	3	\$55,139	\$39,860	\$7,793

HOSP ID	NUM	NON-TRANSP HOSP # AMB PROF SVC	NON-TRANSP HOSP # AMB RX	NON-TRANSP AMB PROF & DRUGS GOVT PAY	NON-TRANSP AMB PROF & DRUGS PNT PAY	NON-TRANSP AMB PROF & DRUGS PD BOS
8	159	162 0	0 0	\$203 \$0	\$224 \$0	\$0 \$0
STATUS		162	0	\$203	\$224	\$0

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=TRANSPLANT DEATH -----

HOSP PROVIDER ID NUM NAME	TRANSP HOSP DIAG CODE	TRANSP HOSP DIAG NAME (SHORT)	TRANSP HOSP TOP PROF CODE (IF DIFF)	TRANSP HOSP TOP PROF NAME (SHORT)
113 SWEDISH MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	V718	OBSEV-SUSPECT COND NEC
73 SWEDISH MEDICAL CTR	2387	LYMPHOPROLIFERAT DIS NOS	2849	APLASTIC ANEMIA NOS
195 COOK FT WORTH CHLD MED CTR	2040	ACUTE LYMPHOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
15 JOHNS HOPKINS HOSPITAL	2051	CHRONIC MYELOID LEUKEMIA		
127 SWEDISH MEDICAL CTR	2849	APLASTIC ANEMIA NOS	5989	URETHRAL STRICTURE NOS

STATUS
YEAR

HOSP TRANSP HOSP ID NUM # EPISODES	WHMC REFERRAL END DATE	HOSP REJECTION DATE	DIAG	CHAMPUS DATE OF DEATH	PREVIOUS HOSP ID NUM	TRANSP HOSP LOS	BMT EPISODE LOS	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE
113	1	NONE	07JUN90	NONE	NONE	35.0	46.0	\$133,714	\$145,264	\$144,310			
73	1	REFERRED	09DEC89	NONE	NONE	65.0	65.0	\$253,270	\$104,142	\$103,041			
195	1	NONE	29JAN90	NONE	NONE	50.0	50.0	\$149,523	\$102,091	\$100,992			
15	1	REFERRED	21NOV89	NONE	NONE	34.0	34.0	\$97,829	\$99,447	\$3,914			
127	1	REFERRED	16JUN90	NONE	NONE	24.0	24.0	\$102,602	\$41,439	\$36,849			
STATUS	5							\$736,938	\$492,383	\$389,106			
YEAR	32							\$7,219,316	\$5,029,573	\$4,633,114			

HOSP BMT EPISODE ID NUM	GRAND TOTAL BMT EPISODE	PD BOS*	TRANSP HOSP ALL PAYMENTS*	TRANSP HOSP TOTAL GOVT PAY	TRANSP HOSP INST GOVT PAY	TRANSP HOSP INST PNT PAY	TRANSP HOSP INST PD BOS	TRANSP HOSP INST # INDEP RX	TRANSP HOSP INDEP DRUGS	TRANSP HOSP GOVT PAY
113	\$954	\$0	\$122,690	\$122,023	\$111,549	\$0	\$0	0	\$0	\$0
73	\$1,101	\$0	\$95,894	\$95,179	\$76,924	\$0	\$0	0	\$0	\$0
195	\$1,099	\$0	\$101,220	\$100,375	\$86,614	\$0	\$0	0	\$0	\$0
15	\$510	\$95,023	\$98,981	\$3,840	\$2,749	\$0	\$94,631	0	\$0	\$0
127	\$4,590	\$0	\$39,923	\$35,590	\$24,079	\$0	\$0	0	\$0	\$0
STATUS	\$8,254	\$95,023	\$458,708	\$357,007	\$301,915	\$0	\$94,631	0	\$0	\$0
YEAR	\$212,122	\$184,337	\$2,679,694	\$2,511,600	\$2,176,018	\$0	\$124,789	151	\$4,723	

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=TRANSPLANT DEATH
(continued)

[illegible]

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

HOSP PROVIDER ID NUM NAME	TRANSF HOSP DIAG CODE	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP PROF CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)
131 FRED HUTCHINSON CANCER CTR	2040	ACUTE LYMPHOID LEUKEMIA	4210	AC/SUBAC BACT ENDOCARD
174 FRED HUTCHINSON CANCER CTR	2050	ACUTE MYELOID LEUKEMIA	2080	ACUTE LEUKEMIA NOS
218 CHILDRENS HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
171 MERCY MEDICAL CTR	2051	CHRONIC MYELOID LEUKEMIA	4239	PERICARDIAL DISEASE NOS
7 FRED HUTCHINSON CANCER CTR	2051	CHRONIC MYELOID LEUKEMIA	25000	DIABETES UNCOMPL TYPE II
58 MARY HITCHCOCK MEMORIAL HOSPITAL	V1062	HX OF MYELOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
100 FRED HUTCHINSON CANCER CTR	2040	ACUTE LYMPHOID LEUKEMIA	2080	ACUTE LEUKEMIA NOS
170 UNIV OF SC MEDICAL CTR	1950	MAL NEO HEAD/FACE/NECK	1940	MALIGN NEOPL ADRENAL
196 UNIV OF IOWA HOSPITAL	2848	APLASTIC ANEMIAS NEC	V1061	HX OF LYMPHOID LEUKEMIA
79 FRED HUTCHINSON CANCER CTR	2058	MYELOID LEUKEMIA NEC	2051	CHRONIC MYELOID LEUKEMIA
161 DUKE MEDICAL CTR	2792	COMBINED IMMUNITY DEFIC	5799	INTEST MALABSORPTION NOS
43 STANFORD UNIV HOSPITAL	2051	CHRONIC MYELOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
128 SWEDISH MEDICAL CTR	1940	MALIGN NEOPL ADRENAL	7847	EPISTAXIS
107 CHILDRENS MEDICAL CTR	2840	CONGEN APLASTIC ANEMIA	V424	BONE TRANSPLANT STATUS
3 HENDRICK MEDICAL CTR	2387	LYMPHOPROLIFERAT DIS NOS	2873	PRIMARY THROMBOCYTOPENIA
10 MD ANDERSON HOSPITAL	2041	CHR LYMPHOID LEUKEMIA		
192 COOK FT WORTH CHLD MED CTR	20500	ACUTE MYELOID LEUKEMIA	2050	ACUTE MYELOID LEUKEMIA
173 FRED HUTCHINSON CANCER CTR	2051	CHRONIC MYELOID LEUKEMIA	2059	MYELOID LEUKEMIA NOS
65 UNIV OF MICH MEDICAL CTR	20158	HODG NODUL SCLERO MULT	20190	HODGKINS NOS-EXTRNOD/NOS
92 JOHNS HOPKINS HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
215 FRED HUTCHINSON CANCER CTR	2040	ACUTE LYMPHOID LEUKEMIA	V593	BONE MARROW DONOR
67 MILWAUKEE CO MEDICAL CTR	2051	CHRONIC MYELOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
202 CHILDRENS HOSPITAL	20012	LYMPHOSARCOMA THORAX	2040	ACUTE LYMPHOID LEUKEMIA
204 LOMA LINDA UNIVERSITY MEDICAL CENTER	2040	ACUTE LYMPHOID LEUKEMIA	2081	CHRONIC LEUKEMIA NOS
88 FRED HUTCHINSON CANCER CTR	20510	CHRONIC MYELOID LEUKEMIA	2051	CHRONIC MYELOID LEUKEMIA
11 METABOLIC MGMT PROGS	20288	LYMPHOMAS NEC MULT	20280	LYMPHOMA NEC-EXTRNOD/NOS

STATUS

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

HOSP ID	TRANSP #	HOSP #	HOSP	WHMC	BMT REJECTION	CHAMPUS DATE OF	PREVIOUS BMT	TRANSP		BMT	GRAND TOTAL		GRAND TOTAL
								DEATH	HOSP ID		NUM	LOS	
131	1	1	17MAY91	NONE	NONE	ALIVE	NONE	102.0	102.0	102.0	\$342,150	\$376,483	\$371,936
174	1	1	15JAN91	SEC HOSP	NONE	ALIVE	NONE	39.0	39.0	112.0	\$258,774	\$312,728	\$310,428
218	1	1	04JUN91	NONE	NONE	ALIVE	NONE	54.0	54.0	68.0	\$274,037	\$284,752	\$283,178
171	1	1	21MAR91	NONE	NONE	ALIVE	NONE	57.0	57.0	146.0	\$377,170	\$228,379	\$213,208
7	1	1	22MAR91	NONE	NONE	ALIVE	NONE	35.0	35.0	111.0	\$292,340	\$198,017	\$170,169
58	1	1	09SEP91	NONE	NONE	ALIVE	NONE	44.0	44.0	138.0	\$299,006	\$185,907	\$177,143
100	1	1	03MAY91	SEC HOSP	NONE	ALIVE	NONE	30.0	30.0	43.0	\$114,435	\$173,549	\$171,779
170	1	1	09DEC90	NONE	NONE	ALIVE	NONE	56.0	56.0	96.0	\$160,711	\$170,883	\$169,644
196	1	1	20MAY91	NONE	NONE	ALIVE	NONE	49.0	49.0	106.0	\$172,309	\$168,013	\$166,946
79	1	1	29NOV90	NONE	NONE	ALIVE	NONE	36.0	36.0	36.0	\$167,923	\$167,243	\$167,183
161	1	1	06NOV90	NONE	NONE	ALIVE	NONE	15.0	15.0	67.0	\$203,515	\$161,767	\$158,946
43	1	1	30MAY91	NONE	NONE	ALIVE	NONE	32.0	32.0	72.0	\$267,534	\$149,969	\$135,246
128	1	1	19OCT90	NONE	NONE	ALIVE	NONE	42.0	42.0	42.0	\$139,479	\$141,351	\$138,290
107	1	1	23FEB91	NONE	NONE	ALIVE	NONE	33.0	33.0	33.0	\$121,575	\$133,305	\$131,430
3	1	1	25JUN91	NONE	NONE	ALIVE	NONE	73.0	73.0	89.0	\$286,909	\$131,455	\$118,662
10	1	1	19OCT90	NONE	NONE	ALIVE	NONE	29.0	29.0	49.0	\$134,461	\$128,043	\$109,154
192	1	1	02SEP91	NONE	NONE	ALIVE	NONE	41.0	41.0	110.0	\$214,383	\$127,322	\$126,460
173	1	1	05NOV90	NONE	NONE	ALIVE	NONE	41.0	41.0	41.0	\$106,994	\$125,909	\$123,367
65	1	1	09MAY91	NONE	NONE	ALIVE	NONE	24.0	24.0	32.0	\$133,231	\$125,007	\$114,124
92	1	1	30SEP91	NONE	NONE	ALIVE	NONE	49.0	49.0	49.0	\$104,393	\$121,449	\$115,628
215	1	1	05DEC90	NONE	NONE	ALIVE	NONE	30.0	30.0	31.0	\$87,402	\$114,745	\$111,973
67	1	1	06MAR91	NONE	NONE	ALIVE	NONE	35.0	35.0	42.0	\$152,402	\$103,515	\$96,911
202	1	1	25APR91	NONE	NONE	ALIVE	NONE	45.0	45.0	45.0	\$144,035	\$102,892	\$102,772
204	1	1	09AUG91	NONE	NONE	ALIVE	NONE	21.0	21.0	84.0	\$223,051	\$91,458	\$88,625
88	1	1	04JUN91	NONE	NONE	ALIVE	NONE	33.0	33.0	33.0	\$103,223	\$64,024	\$1,663
11	1	1	27JUN91	NONE	NONE	ALIVE	NONE	28.0	28.0	28.0	\$13,501	\$16,792	\$3,446
											\$4,894,943	\$4,104,957	\$3,878,311
</													

***NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	GRAND TOTAL BMT EPISODE PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANSB HOSP ALL PAYMENTS*	TRANSB HOSP TOTAL GOVT PAY	TRANSB HOSP GOVT PAY	TRANSB HOSP INST PNT PAY	TRANSB HOSP INST PD BOS	TRANSB HOSP # INDEP RX	TRANSB HOSP INDEP DRUGS GOVT PAY
131	\$4,547	\$0	\$363,166	\$359,395	\$328,692	\$0	\$0	0	\$0
174	\$2,300	\$0	\$107,190	\$106,874	\$89,953	\$0	\$0	0	\$0
218	\$1,574	\$0	\$218,847	\$218,847	\$194,901	\$0	\$0	0	\$0
171	\$15,171	\$0	\$76,242	\$72,889	\$52,587	\$0	\$0	0	\$0
7	\$27,848	\$0	\$59,250	\$54,896	\$39,813	\$0	\$0	0	\$0
58	\$8,764	\$0	\$72,836	\$71,628	\$66,565	\$0	\$0	0	\$0
100	\$1,770	\$0	\$114,426	\$113,854	\$79,734	\$0	\$0	0	\$0
170	\$1,239	\$0	\$115,884	\$115,498	\$102,872	\$0	\$0	7	\$153
196	\$1,067	\$0	\$96,497	\$96,497	\$86,326	\$0	\$0	0	\$0
79	\$60	\$0	\$167,243	\$167,183	\$141,791	\$0	\$0	0	\$0
161	\$2,821	\$0	\$21,037	\$21,037	\$14,617	\$0	\$0	0	\$0
43	\$14,723	\$0	\$73,961	\$69,547	\$50,571	\$0	\$0	821	\$1,319
128	\$3,061	\$0	\$117,805	\$117,191	\$99,164	\$0	\$0	0	\$0
107	\$1,875	\$0	\$110,931	\$110,693	\$97,440	\$0	\$0	0	\$0
3	\$12,793	\$0	\$71,554	\$65,471	\$60,559	\$0	\$0	1	\$21
10	\$18,889	\$0	\$39,361	\$36,993	\$29,857	\$0	\$0	0	\$0
192	\$862	\$0	\$67,904	\$67,901	\$60,603	\$0	\$0	0	\$0
173	\$2,427	\$115	\$107,389	\$106,498	\$91,274	\$0	\$0	0	\$0
65	\$10,883	\$0	\$74,197	\$71,238	\$60,473	\$0	\$0	0	\$0
92	\$5,821	\$0	\$109,830	\$105,332	\$95,187	\$0	\$0	0	\$0
215	\$2,772	\$0	\$88,399	\$87,446	\$62,671	\$0	\$0	0	\$0
67	\$6,604	\$0	\$67,339	\$64,659	\$51,132	\$0	\$0	0	\$0
202	\$120	\$0	\$83,578	\$83,573	\$69,400	\$0	\$0	0	\$0
204	\$2,833	\$0	\$16,631	\$16,523	\$9,694	\$0	\$0	0	\$0
88	\$0	\$62,361	\$47,828	\$516	\$0	\$0	\$42,353	0	\$0
11	\$24	\$13,322	\$13,720	\$2,127	\$0	\$0	\$0	0	\$0
STATUS	\$150,848	\$75,798	\$2,503,045	\$2,404,306	\$2,035,876	\$0	\$42,353	829	\$1,493

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED
DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSB, NON-TRANS,
AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	TRANSP HOSP INDEP DRUGS PNT PAY	TRANSP HOSP INDEP DRUGS PD BOS	TRANSP HOSP # PROF SVC	TRANSP HOSP PROF SERV GOVT PAY	TRANSP HOSP PROF SERV PNT PAY	TRANSP HOSP PROF SERV PD BOS	TRANSP HOSP # AMB	TRANSP HOSP PROF SVC	TRANSP HOSP # AMB RX	TRANSP AMB PROF & DRUGS GOVT PAY
131	\$0	\$0	317	\$30,703	\$3,771	\$0	91	0	0	\$12,541
174	\$0	\$0	130	\$16,921	\$316	\$0	0	0	0	\$0
218	\$0	\$0	144	\$23,946	\$0	\$0	0	0	0	\$0
171	\$0	\$0	734	\$20,302	\$3,353	\$0	0	0	0	\$0
7	\$0	\$0	210	\$15,083	\$4,354	\$0	65	2	0	\$3,132
58	\$0	\$0	142	\$5,063	\$1,208	\$0	242	0	0	\$6,794
100	\$0	\$0	93	\$34,120	\$572	\$0	10	0	0	\$1,217
170	\$0	\$0	202	\$12,473	\$386	\$0	44	0	0	\$3,804
196	\$0	\$0	115	\$10,171	\$0	\$0	20	0	0	\$3,887
79	\$0	\$0	424	\$25,392	\$60	\$0	0	0	0	\$0
161	\$0	\$0	69	\$6,420	\$0	\$0	428	3	0	\$28,791
43	\$65	\$0	189	\$17,657	\$4,349	\$0	277	111	0	\$23,833
128	\$0	\$0	234	\$18,027	\$614	\$0	368	0	0	\$21,099
107	\$0	\$0	110	\$13,253	\$238	\$0	264	0	0	\$20,737
3	\$8	\$0	453	\$4,891	\$6,075	\$0	406	3	0	\$44,501
10	\$0	\$0	144	\$7,136	\$2,368	\$0	31	0	0	\$2,457
192	\$0	\$0	117	\$7,298	\$3	\$0	9	0	0	\$779
173	\$0	\$0	259	\$15,224	\$863	\$28	126	0	0	\$12,588
65	\$0	\$0	70	\$10,765	\$2,959	\$0	56	0	0	\$9,823
92	\$0	\$0	155	\$10,145	\$4,498	\$0	0	0	0	\$0
215	\$0	\$0	197	\$24,775	\$953	\$0	202	0	0	\$20,078
67	\$0	\$0	361	\$13,527	\$2,680	\$0	201	0	0	\$24,762
202	\$0	\$0	140	\$14,173	\$5	\$0	84	0	0	\$19,199
204	\$0	\$0	119	\$6,829	\$108	\$0	5	0	0	\$142
88	\$0	\$0	19	\$516	\$0	\$4,959	42	0	0	\$1,147
11	\$0	\$0	216	\$2,127	\$4	\$11,589	102	0	0	\$1,319
STATUS	\$73	\$0	5,363	\$366,937	\$39,737	\$16,576	3,073	119		\$262,630

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID	NUM	TRANSF AMB PROF & DRUGS PNT PAY	TRANSF AMB PROF & DRUGS PD BOS	NON-TRANSF HOSP # EPISODES	NON-TRANSF HOSP # DAYS	NON-TRANSF HOSP # PROF SVC	NON-TRANSF HOSP # INDEP RX	NON-TRANSF HOSP TOTAL GOVT PAY	NON-TRANSF HOSP TOTAL PNT PAY	NON-TRANSF HOSP TOTAL PD BOS
131		\$776	\$0	0	0	0	0	\$0	\$0	\$0
174		\$0	\$0	9	73	1,337	1	\$191,520	\$1,856	\$0
218		\$0	\$0	4	14	99	3	\$29,514	\$604	\$0
171		\$0	\$0	11	89	1,031	0	\$127,961	\$11,659	\$0
7		\$1,344	\$0	1	76	208	0	\$78,379	\$7,015	\$0
58		\$2,271	\$0	7	94	509	2	\$96,598	\$4,941	\$0
100		\$67	\$0	2	13	194	0	\$48,525	\$940	\$0
170		\$66	\$0	6	40	151	8	\$42,116	\$763	\$0
196		\$0	\$0	14	57	255	1	\$66,038	\$1,057	\$0
79		\$0	\$0	0	0	0	0	\$0	\$0	\$0
161		\$991	\$0	3	52	616	1	\$66,982	\$1,830	\$0
43		\$5,190	\$0	3	40	103	29	\$39,731	\$5,032	\$0
128		\$2,447	\$0	0	0	0	0	\$0	\$0	\$0
107		\$1,637	\$0	0	0	0	0	\$0	\$0	\$0
3		\$994	\$0	1	16	117	1	\$2,057	\$3,505	\$0
10		\$797	\$0	2	20	112	1	\$56,440	\$14,769	\$0
192		\$0	\$0	7	69	182	0	\$55,289	\$859	\$0
173		\$897	\$0	1	0	52	0	\$3,419	\$425	\$46
65		\$2,271	\$0	5	8	99	1	\$19,378	\$5,061	\$0
92		\$0	\$0	4	0	36	0	\$9,180	\$938	\$0
215		\$835	\$0	1	1	21	0	\$4,449	\$984	\$0
67		\$1,835	\$0	1	7	10	5	\$7,337	\$2,014	\$0
202		\$115	\$0	0	0	0	0	\$0	\$0	\$0
204		\$121	\$0	11	63	1,596	1	\$57,484	\$1,346	\$0
88		\$0	\$15,049	0	0	0	0	\$0	\$0	\$0
11		\$20	\$1,733	0	0	0	0	\$0	\$0	\$0
STATUS		\$22,674	\$16,782	93	732	6,728	54	\$1,002,397	\$65,598	\$46

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

(continued)

HOSP ID NUM	NON-TRANSP # AMB PROF SVC	NON-TRANSP HOSP # AMB RX	NON-TRANSP AMB PROF & DRUGS GOVT PAY	NON-TRANSP AMB PROF & DRUGS PNT PAY	NON-TRANSP AMB PROF & DRUGS PD BOS
131	0	0	\$0	\$0	\$0
174	247	4	\$12,034	\$128	\$0
218	75	0	\$34,817	\$970	\$0
171	222	1	\$12,358	\$159	\$0
7	472	5	\$33,762	\$15,135	\$0
58	58	3	\$2,123	\$344	\$0
100	69	0	\$8,183	\$191	\$0
170	76	0	\$8,226	\$24	\$0
196	11	0	\$524	\$10	\$0
79	0	0	\$0	\$0	\$0
161	936	2	\$42,136	\$0	\$0
43	39	8	\$2,135	\$87	\$0
128	0	0	\$0	\$0	\$0
107	0	0	\$0	\$0	\$0
3	253	0	\$6,633	\$2,211	\$0
10	68	0	\$13,264	\$955	\$0
192	13	0	\$2,491	\$0	\$0
173	21	0	\$862	\$242	\$41
65	166	0	\$13,685	\$592	\$0
92	29	0	\$1,116	\$385	\$0
215	0	0	\$0	\$0	\$0
67	8	0	\$153	\$75	\$0
202	0	0	\$0	\$0	\$0
204	1,306	1	\$14,476	\$1,258	\$0
88	0	0	\$0	\$0	\$0
11	0	0	\$0	\$0	\$0
STATUS	4,069	24	\$208,978	\$22,766	\$41

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANS, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE DEATH -----

HOSP PROVIDER ID NUM NAME	TRANS HOSP DIAG CODE	TRANS HOSP DIAG NAME (SHORT)	TRANS HOSP TOP PROF CODE (1F DIFF)	TRANS HOSP TOP PROF NAME (SHORT)
22 BARNES HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
168 FRED HUTCHINSON CANCER CTR	2050	ACUTE MYELOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
130 DUKE MEDICAL CTR	V1061	HX OF LYMPHOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
40 JOHNS HOPKINS HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	2051	CHRONIC MYELOID LEUKEMIA
9 EMORY UNIV HOSPITAL	20280	LYMPHOMA NEC-EXTRNOD/NOS	20000	RETICULOSARC-EXTRNOD/NOS

STATUS

HOSP ID NUM	TRANS HOSP # EPISODES	WHMC REFERRAL	HOSP END DATE	BMT REJECTION	CHAMPUS DATE OF DEATH	PREVIOUS HOSP ID	TRANS HOSP LOS	BMT EPISODE LOS	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE
22	1	REFERRED	04SEP91	SEC HOSP	14JAN92	NONE	47.0	145.0	\$1,058,845	\$429,044	\$426,720	\$426,720
168	1	NONE	10SEP91	NONE	25OCT91	NONE	79.0	115.0	\$396,893	\$425,539	\$400,659	\$400,659
130	1	NONE	03MAR91	SEC HOSP	15JUL91	NONE	115.0	177.0	\$394,503	\$357,695	\$355,631	\$355,631
40	1	NONE	12MAR91	SEC HOSP	11MAY91	NONE	49.0	88.0	\$288,997	\$329,529	\$327,765	\$327,765
9	1	NONE	11JAN91	NONE	16NOV91	NONE	37.0	67.0	\$201,716	\$199,405	\$22,262	\$22,262
STATUS	5								\$2,340,954	\$1,741,212	\$1,533,037	\$1,533,037

HOSP ID NUM	TRANS HOSP # EPISODES	GRAND TOTAL BMT EPISODE	PD BOS*	TRANS HOSP ALL PAYMENTS*	TRANS HOSP GOVT PAY	TRANS HOSP INST GOVT PAY	TRANS HOSP INST PNT PAY	TRANS HOSP INST PD BOS	TRANS HOSP INST # INDEP RX	TRANS HOSP INDEP DRUGS	TRANS HOSP GOVT PAY
22	\$2,324	\$0	\$107,144	\$105,773	\$88,818	\$0	\$0	\$0	0	\$0	\$0
168	\$24,880	\$0	\$304,330	\$297,960	\$278,011	\$0	\$0	\$0	0	\$0	\$0
130	\$2,064	\$0	\$214,752	\$214,752	\$198,877	\$0	\$0	\$0	0	\$0	\$0
40	\$1,764	\$0	\$152,181	\$151,211	\$136,598	\$0	\$0	\$0	0	\$0	\$0
9	\$3,506	\$173,637	\$63,406	\$3,170	\$0	\$0	\$0	\$54,786	1	\$110	\$110
STATUS	\$34,538	\$173,637	\$841,813	\$772,866	\$702,304	\$0	\$0	\$54,786	1	\$110	\$110

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPIISODE DEATH
(continued)

[illegible]

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

HOSP PROVIDER ID NUM NAME	TRANSP HOSP DIAG CODE	DIAG NAME (SHORT)	TOP PROF CODE (IF DIFF)	TOP PROF NAME (SHORT)
201 CHILDRENS HOSP OF L A	2040	ACUTE LYMPHOID LEUKEMIA	27919	DEFIC CELL IMMUNITY NOS
109 UNIV OF MINN HOSPITAL	27912	WISKOTT-ALDRICH SYNDROME	27919	DEFIC CELL IMMUNITY NOS
177 HASTINGS MEDICAL CTR	99689	COMP OTH ORGAN TRANSPLNT	2051	CHRONIC MYELOID LEUKEMIA
103 PITT COUNTY MEMORIAL HOSPITAL	2840	CONGEN APLASTIC ANEMIA	7893	ABDOM/PELVIC SWELLING NEC
80 BARNES HOSPITAL	20018	LYMPHOSARCOMA MULT	V593	BONE MARROW DONOR

STATUS
YEAR

HOSP ID	HOSP NUM	TRANSP #	HOSP	WHMC	REFERRAL	HOSP END DATE	BMT REJECTION		CHAMPUS DATE	PREVIOUS		TRANSP		BMT	GRAND TOTAL		GRAND TOTAL	
							DIAG	DEATH		BMT	HOSP	TRANSP	HOSP		LOS	BMT	EPISODE	BMT
	201	1		NONE	12JUN91		NONE		12JUN91		NONE	43.0	46.0		\$430,175	\$454,697	\$454,422	
	109	1	REFERRED	14AUG91		NONE	NONE		14AUG91		NONE	84.0	92.0		\$372,515	\$453,505	\$434,738	
	177	1	NONE	16FEB91		PRI	HOSP		16FEB91		178	61.0	179.0		\$751,737	\$286,019	\$284,741	
	103	1	REFERRED	13MAY91		NONE	NONE		13MAY91		NONE	157.0	169.0		\$301,617	\$134,226	\$127,687	
	80	1	REFERRED	13AUG91		NONE	NONE		13AUG91		NONE	34.0	44.0		\$186,239	\$94,350	\$93,639	
STATUS		5													\$2,042,283	\$1,422,797	\$1,395,227	
YEAR		36													\$9,278,180	\$7,268,966	\$6,806,575	

HOSP ID	HOSP NUM	GRAND TOTAL		GRAND TOTAL		TRANSF HOSP TOTAL	TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP	
		BMT PNT	EPISODE PAY*	BMT PNT	EPISODE PAY*		TRANSF HOSP ALL	TRANSF HOSP PAYMENTS*	TRANSF HOSP GOVT	TRANSF HOSP INST	TRANSF HOSP PNT	TRANSF HOSP INST	TRANSF HOSP GOVT	TRANSF HOSP INST	TRANSF HOSP PNT	TRANSF HOSP INST	TRANSF HOSP GOVT	TRANSF HOSP INST
201		\$275		\$0		\$427,059		\$427,048		\$411,420		\$0		\$0		\$0		\$0
109		\$18,767		\$0		\$416,806		\$399,024		\$350,409		\$0		\$0		\$0		\$0
177		\$1,278		\$0		\$165,341		\$165,075		\$141,043		\$0		\$0		\$0		\$0
103		\$6,539		\$0		\$114,606		\$109,127		\$86,567		\$0		\$0		\$0		\$0
80		\$711		\$0		\$62,027		\$62,021		\$50,100		\$0		\$0		\$0		\$0

STATUS		\$27,570		\$0		\$1,185,839		\$1,162,295		\$1,039,539		\$0		\$0		\$0		\$0
YEAR		\$212,956		\$249,435		\$4,530,697		\$4,339,467		\$3,777,719		\$0		\$0		\$97,139		\$1,603

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=TRANSPLANT DEATH
(continued)

[illegible]

***NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

HOSP PROVIDER ID NUM NAME	TRANSF HOSP DIAG CODE	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)
169 SANTA ROSA HOSPITAL	2775	MUCOPOLYSACCHARIDOSIS	78609	RESPIRATORY ABNORM NEC
110 VENTURA COUNTY MEDICAL CTR	7806	PYREXIA UNKNOWN ORIGIN	5720	ABSCSS OF LIVER
208 FRED HUTCHINSON CANCER CTR	586	RENAL FAILURE NOS	2080	ACUTE LEUKEMIA NOS
185 ST LOUIS UNIV HOSPITAL	20400	ACUTE LYMPHOID LEUKEMIA	1921	MAL NEO CEREBRAL MENING
98 YALE NEW HAVEN HOSPITAL	20801	AC LEUKEMIA NOS IN REMIS	2050	ACUTE MYELOID LEUKEMIA
167 UCSF MEDICAL CTR	2775	MUCOPOLYSACCHARIDOSIS	27700	CYSTIC FIBROS W/O ILEUS
200 UNIVERSITY MEDICAL CTR	2792	COMBINED IMMUNITY DEFIC	V802	SCREENING-EYE COND NEC
160 DUKE MEDICAL CTR	2792	COMBINED IMMUNITY DEFIC	75659	OSTEODYSTROPHY NEC
112 SWEDISH MEDICAL CTR	20401	AC LYMPH LEUK IN REMISSN	2040	ACUTE LYMPHOID LEUKEMIA
186 UCLA MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	2048	LYMPHOID LEUKEMIA NEC
132 CHILDRENS HOSPITAL	20500	ACUTE MYELOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
104 CHILDRENS HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	78609	RESPIRATORY ABNORM NEC
184 SANTA ROSA HOSPITAL	20510	CHRONIC MYELOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
129 FRED HUTCHINSON CANCER CTR	7803	CONVULSIONS	V428	TRANSPLANT STATUS NEC
182 UNIV OF MINN HOSPITAL	20401	AC LYMPH LEUK IN REMISSN	2040	ACUTE LYMPHOID LEUKEMIA
32 SWEDISH MEDICAL CTR	20510	CHRONIC MYELOID LEUKEMIA	2051	CHRONIC MYELOID LEUKEMIA
99 SWEDISH MEDICAL CTR	20400	ACUTE LYMPHOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
207 UCSF MEDICAL CTR	2889	WBC DISEASE NOS	2058	MYELOID LEUKEMIA NEC
19 HENRY FORD HOSPITAL	20300	MULTIPLE MYELOMA	2030	MULTIPLE MYELOMA
54 UNIVERSITY HOSPITAL-CLEVELAND	20510	CHRONIC MYELOID LEUKEMIA	5771	CHRONIC PANCREATITIS
198 SWEDISH MEDICAL CTR	20400	ACUTE LYMPHOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
33 STANFORD UNIV HOSPITAL	486	PNEUMONIA, ORGANISM NOS	20280	LYMPHOMA NEC-EXTRNOD/NOS
94 ROCHESTER METHODIST HOSPITAL	20401	AC LYMPH LEUK IN REMISSN		

STATUS

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DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID	TRANS #	HOSP	WHMC	HOSP	REJECTION	BMT	CHAMPUS	PREVIOUS	TRANS	BMT	GRAND TOTAL	GRAND TOTAL	GRAND TOTAL
ID NUM	#	EPISODES	REFERRAL	END DATE	DIAG	DATE	DEATH	HOSP ID	NUM	LOS	ALL BILLINGS*	BMT EPISODE	BMT EPISODE
													GOVT PAY*
169	1		REFERRED	05NOV91	SEC HOSP	ALIVE	ALIVE	NONE	110.0	159.0	\$597,152	\$716,445	\$704,975
110	1		NONE	22APR92	NONE	ALIVE	ALIVE	NONE	309.0	321.0	\$1,069,162	\$707,947	\$705,881
208	1		NONE	26JUL92	NONE	ALIVE	ALIVE	NONE	69.0	108.0	\$347,729	\$359,636	\$344,811
185	1		NONE	21DEC91	NONE	ALIVE	ALIVE	NONE	39.0	52.0	\$345,460	\$356,060	\$72,984
98	1		NONE	20MAR92	NONE	ALIVE	ALIVE	NONE	157.0	187.0	\$380,516	\$331,876	\$329,843
167	1		NONE	12DEC91	NONE	ALIVE	ALIVE	NONE	64.0	64.0	\$255,929	\$330,764	\$327,434
200	1		NONE	13MAR92	NONE	ALIVE	ALIVE	NONE	126.0	126.0	\$362,257	\$317,464	\$314,388
160	1		NONE	21JAN92	NONE	ALIVE	ALIVE	161	55.0	57.0	\$283,630	\$313,264	\$310,358
112	1		NONE	11APR92	NONE	ALIVE	ALIVE	NONE	43.0	93.0	\$258,394	\$299,353	\$274,597
186	1		NONE	11DEC91	NONE	ALIVE	ALIVE	187	37.0	44.0	\$294,903	\$268,312	\$267,998
132	1		NONE	23JUN92	SEC HOSP	ALIVE	ALIVE	NONE	36.0	104.0	\$293,317	\$244,305	\$218,929
104	1		NONE	25NOV91	NONE	ALIVE	ALIVE	NONE	56.0	56.0	\$198,389	\$223,094	\$222,684
184	1		NONE	13MAY92	NONE	ALIVE	ALIVE	NONE	34.0	49.0	\$191,069	\$210,373	\$208,473
129	1		NONE	18MAR92	NONE	ALIVE	ALIVE	NONE	79.0	79.0	\$191,323	\$188,036	\$180,739
182	1		NONE	15SEP92	SEC HOSP	ALIVE	ALIVE	183	53.0	56.0	\$158,718	\$181,387	\$177,347
32	1		NONE	16MAR92	NONE	ALIVE	ALIVE	NONE	35.0	54.0	\$197,710	\$172,148	\$158,089
99	1		NONE	19JUN92	NONE	ALIVE	ALIVE	100	32.0	40.0	\$119,767	\$147,990	\$144,599
207	1		NONE	27JUL92	NONE	ALIVE	ALIVE	NONE	42.0	42.0	\$133,611	\$146,996	\$146,806
19	1		NONE	27MAY92	NONE	ALIVE	ALIVE	NONE	26.0	37.0	\$113,315	\$141,948	\$128,219
54	1		NONE	23APR92	NONE	ALIVE	ALIVE	NONE	94.0	96.0	\$334,443	\$140,098	\$135,556
198	1		NONE	09DEC91	NONE	ALIVE	ALIVE	NONE	42.0	67.0	\$134,112	\$138,697	\$132,620
33	1		NONE	24DEC91	NONE	ALIVE	ALIVE	NONE	4.0	10.0	\$146,343	\$136,916	\$128,234
94	1		NONE	12NOV91	NONE	ALIVE	ALIVE	95	38.0	42.0	\$81,853	\$89,350	\$505
											\$6,489,102	\$6,162,459	\$5,636,069
STATUS													
											23		

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID	NUM	GRAND TOTAL BMT EPISODE PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANS ALL PAYMENTS*	TRANS HOSP TOTAL GOVT PAY	TRANS HOSP GOVT PAY	TRANS HOSP PNT PAY	TRANS HOSP INST PAY	TRANS HOSP PD BOS	TRANS HOSP # INDEP RX	TRANS HOSP INDEP DRUGS GOVT PAY
169		\$11,470	\$0	\$507,676	\$499,862	\$461,015	\$0	\$0	\$0	0	\$0
110		\$2,066	\$0	\$646,403	\$645,415	\$565,217	\$0	\$0	\$0	0	\$0
208		\$14,825	\$0	\$292,049	\$282,453	\$257,844	\$0	\$0	\$0	0	\$0
185		\$0	\$283,076	\$272,919	\$58,162	\$54,647	\$0	\$209,343	\$0	6	\$548
98		\$2,033	\$0	\$264,571	\$263,858	\$253,417	\$0	\$0	\$0	0	\$0
167		\$3,330	\$0	\$306,250	\$305,251	\$229,751	\$0	\$0	\$0	0	\$0
200		\$3,076	\$0	\$312,234	\$309,718	\$298,818	\$0	\$0	\$0	0	\$0
160		\$2,906	\$0	\$289,326	\$286,698	\$270,818	\$0	\$0	\$0	0	\$0
112		\$24,756	\$0	\$177,396	\$174,427	\$145,340	\$0	\$0	\$0	0	\$0
186		\$314	\$0	\$239,385	\$239,136	\$231,185	\$0	\$0	\$0	0	\$0
132		\$25,376	\$0	\$31,962	\$30,571	\$0	\$0	\$0	\$0	1	\$1,402
104		\$410	\$0	\$219,875	\$219,578	\$194,506	\$0	\$0	\$0	0	\$0
184		\$1,900	\$0	\$152,760	\$152,405	\$128,512	\$0	\$0	\$0	1	\$92
129		\$7,297	\$0	\$169,057	\$163,680	\$138,753	\$0	\$0	\$0	0	\$0
182		\$4,040	\$0	\$163,635	\$161,299	\$145,370	\$0	\$0	\$0	0	\$0
32		\$14,059	\$0	\$77,280	\$73,677	\$51,810	\$0	\$0	\$0	0	\$0
99		\$3,391	\$0	\$84,313	\$83,794	\$70,693	\$0	\$0	\$0	0	\$0
207		\$190	\$0	\$145,214	\$145,031	\$131,378	\$0	\$0	\$0	0	\$0
19		\$13,729	\$0	\$85,478	\$84,228	\$73,760	\$0	\$0	\$0	13	\$2,540
54		\$4,542	\$0	\$129,901	\$128,382	\$119,058	\$0	\$0	\$0	0	\$0
198		\$6,077	\$0	\$120,645	\$116,622	\$102,302	\$0	\$0	\$0	0	\$0
33		\$8,682	\$0	\$32,876	\$31,355	\$7,578	\$0	\$0	\$0	0	\$0
94		\$16,084	\$72,761	\$66,518	\$0	\$0	\$0	\$66,518	\$0	0	\$0
STATUS		\$170,553	\$355,837	\$4,787,723	\$4,455,602	\$3,931,772	\$0	\$275,861	\$0	21	\$4,582

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANS, NON-TRANS, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

(continued)

HOSP ID	NUM	TRANSP HOSP INDEP DRUGS PNT PAY	TRANSP HOSP INDEP DRUGS PD BOS	TRANSP HOSP # PROF SVC	TRANSP HOSP PROF SERV GOVT PAY	TRANSP HOSP PROF SERV PNT PAY	TRANSP HOSP PROF SERV PD BOS	TRANSP HOSP # AMB PROF SVC	TRANSP HOSP # AMB RX	TRANSP AMB PROF & DRUGS GOVT PAY
169		\$0	\$0	411	\$38,847	\$7,814	\$0	13	0	\$2,943
110		\$0	\$0	808	\$80,198	\$988	\$0	0	0	\$0
208		\$0	\$0	306	\$24,609	\$9,596	\$0	40	0	\$6,194
185		\$0	\$579	42	\$2,967	\$0	\$4,835	113	0	\$2,290
98		\$0	\$0	263	\$10,441	\$713	\$0	0	0	\$0
167		\$0	\$0	428	\$75,500	\$999	\$0	164	0	\$22,183
200		\$0	\$0	216	\$10,900	\$2,516	\$0	49	0	\$4,670
160		\$0	\$0	182	\$15,880	\$2,628	\$0	70	1	\$6,775
112		\$0	\$0	185	\$29,087	\$2,969	\$0	133	0	\$9,066
186		\$0	\$0	133	\$7,951	\$249	\$0	74	0	\$12,674
132		\$350	\$0	320	\$29,169	\$1,041	\$0	89	8	\$13,628
104		\$0	\$0	230	\$25,072	\$297	\$0	17	0	\$3,106
184		\$0	\$0	166	\$23,801	\$355	\$0	175	0	\$14,412
129		\$0	\$0	197	\$24,927	\$5,377	\$0	157	0	\$17,059
182		\$0	\$0	137	\$15,929	\$2,336	\$0	14	0	\$1,656
32		\$0	\$0	161	\$21,867	\$3,603	\$0	53	0	\$5,237
99		\$0	\$0	92	\$13,101	\$519	\$0	0	0	\$0
207		\$0	\$0	193	\$13,653	\$183	\$0	51	0	\$1,775
19		\$44	\$0	91	\$7,928	\$1,206	\$0	92	18	\$8,101
54		\$0	\$0	89	\$9,324	\$1,519	\$0	0	0	\$0
198		\$0	\$0	144	\$14,320	\$4,023	\$0	0	0	\$0
33		\$0	\$0	56	\$23,777	\$1,521	\$0	295	0	\$78,234
94		\$0	\$0	0	\$0	\$0	\$0	0	0	\$0
STATUS		\$394	\$579	4,850	\$519,248	\$50,452	\$4,835	1,599	27	\$210,003

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	TRANSF AMB PROF & DRUGS PNT PAY	TRANSF AMB PROF & DRUGS PD BOS	NON-TRANSF HOSP # EPISODES	NON-TRANSF HOSP # DAYS	NON-TRANSF HOSP # PROF SVC	NON-TRANSF HOSP # INDEP RX	NON-TRANSF HOSP TOTAL GOVT PAY	NON-TRANSF HOSP TOTAL PNT PAY	NON-TRANSF HOSP TOTAL PD BOS
169	\$0	\$0	9	49	599	0	\$174,650	\$2,243	\$0
110	\$0	\$0	3	12	127	0	\$54,460	\$503	\$0
208	\$1,535	\$0	4	39	310	0	\$54,511	\$3,579	\$0
185	\$0	\$5,061	2	13	23	2	\$2,283	\$0	\$43,529
98	\$0	\$0	5	30	96	0	\$60,128	\$1,241	\$0
167	\$2,331	\$0	0	0	0	0	\$0	\$0	\$0
200	\$560	\$0	0	0	0	0	\$0	\$0	\$0
160	\$216	\$0	1	2	42	0	\$16,885	\$62	\$0
112	\$2,005	\$0	6	50	351	0	\$80,312	\$19,029	\$0
186	\$50	\$0	1	7	30	0	\$15,675	\$10	\$0
132	\$2,912	\$0	7	68	772	32	\$166,630	\$19,755	\$0
104	\$113	\$0	0	0	0	0	\$0	\$0	\$0
184	\$308	\$0	1	15	111	1	\$39,554	\$893	\$0
129	\$1,920	\$0	0	0	0	0	\$0	\$0	\$0
182	\$495	\$0	2	3	28	0	\$11,485	\$579	\$0
32	\$3,803	\$0	1	19	105	0	\$46,050	\$1,845	\$0
99	\$0	\$0	2	8	80	0	\$33,375	\$464	\$0
207	\$7	\$0	0	0	0	0	\$0	\$0	\$0
19	\$2,003	\$0	4	11	130	29	\$30,003	\$8,464	\$0
54	\$0	\$0	1	2	28	0	\$4,306	\$2,076	\$0
198	\$0	\$0	2	25	91	1	\$12,474	\$2,037	\$0
33	\$6,021	\$0	1	6	19	0	\$4,533	\$0	\$0
94	\$0	\$0	1	4	0	0	\$505	\$16,084	\$6,243
STATUS	\$24,279	\$5,061	53	363	2,942	65	\$807,819	\$78,864	\$49,772

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	NON-TRANSF HOSP # AMB PROF SVC	NON-TRANSF HOSP # AMB RX	NON-TRANSF AMB PROF & DRUGS GOVT PAY	NON-TRANSF AMB PROF & DRUGS PNT PAY	NON-TRANSF AMB PROF & DRUGS PD BOS
169	236	1	\$27,520	\$1,413	\$0
110	49	1	\$6,006	\$575	\$0
208	33	0	\$1,653	\$115	\$0
185	97	7	\$10,249	\$0	\$19,729
98	17	0	\$5,857	\$79	\$0
167	0	0	\$0	\$0	\$0
200	0	0	\$0	\$0	\$0
160	0	0	\$0	\$0	\$0
112	241	1	\$10,792	\$753	\$0
186	8	0	\$513	\$5	\$0
132	132	0	\$8,100	\$1,318	\$0
104	0	0	\$0	\$0	\$0
184	23	0	\$2,102	\$344	\$0
129	0	0	\$0	\$0	\$0
182	13	0	\$2,907	\$630	\$0
32	260	0	\$33,125	\$4,808	\$0
99	149	0	\$27,430	\$2,408	\$0
207	0	0	\$0	\$0	\$0
19	79	32	\$5,887	\$2,012	\$0
54	38	0	\$2,868	\$947	\$0
198	37	0	\$3,524	\$17	\$0
33	107	0	\$14,112	\$1,140	\$0
94	0	0	\$0	\$0	\$0
STATUS	1,519	42	\$162,645	\$16,564	\$19,729

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE DEATH -----

HOSP PROVIDER ID NUM NAME	HOSP TRANSF HOSP ID NUM # EPISODES	REFERRAL END DATE	WHMC	HOSP	BMT REJECTION DATE	DIAG	DEATH	HOSP ID NUM	PREVIOUS HOSP ID NUM	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP PROF CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)	ORGANISM NOS
86 RUSH-PRESBYTERIAN-ST LUKE	2050	ACUTE MYELOID LEUKEMIA	486	PNEUMONIA, ORGANISM NOS									
	86	1	NONE	16NOV91	NONE	19MAR92	NONE	135.0	203.0	\$1,151,484	\$526,794	\$516,888	
		GRAND TOTAL											
		HOSP BMT EPISODE											
		HOSP PNT PAY*											
		86	\$9,906	\$0	\$355,619	\$353,674	\$345,778	\$0	\$0	\$0	\$0	\$0	\$5
		TRANSF HOSP											
		HOSP INDEP DRUGS											
		86	\$159	\$0	46	\$7,891	\$1,786	\$0	20	0	0	\$3,341	
		TRANSF HOSP											
		HOSP INDEP DRUGS											
		86	\$230	\$0	3	68	191	2	\$134,100	\$5,591	\$0		
		TRANSF HOSP											
		HOSP INDEP DRUGS											
		86	\$132	\$0	3	\$25,773	\$2,140	\$0					

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=TRANSPLANT DEATH -----

HOSP PROVIDER ID NUM NAME	TRANSF HOSP DIAG CODE	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP PROF CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)
136 UCLA MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	2050	ACUTE MYELOID LEUKEMIA
51 JACKSON HOSPITAL	20400	ACUTE LYMPHOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
134 BRACKENRIDGE HOSPITAL	20400	ACUTE LYMPHOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA

STATUS
YEAR
BMT_TYPE

HOSP ID NUM	TRANSF HOSP # EPISODES	WHMC REFERRAL	HOSP END DATE	BMT REJECTION DATE	CHAMPUS DEATH	PREVIOUS BMT HOSP ID NUM	TRANSF HOSP LOS	BMT EPISODE LOS	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE
136	1	REFERRED	01OCT91	PRI HOSP	01OCT91	NONE	119.0	152.0	\$853,728	\$579,793	\$576,839	\$576,839
51	1	NONE	13OCT91	NONE	13OCT91	NONE	89.0	143.0	\$354,146	\$189,063	\$184,869	\$184,869
134	1	NONE	08APR92	NONE	08APR92	NONE	53.0	62.0	\$235,334	\$137,019	\$127,980	\$127,980
STATUS	3								\$1,443,208	\$905,875	\$889,688	\$889,688
YEAR	27								\$9,083,794	\$7,595,128	\$7,042,645	\$7,042,645
BMT_TYPE	110								\$27,619,057	\$21,377,270	\$19,794,753	\$19,794,753

HOSP ID NUM	TRANSF HOSP # EPISODES	GRAND TOTAL BMT EPISODE	PD BOS*	TRANSF HOSP ALL PAYMENTS*	TRANSF HOSP TOTAL GOVT PAY	PREVIOUS BMT HOSP ID NUM	TRANSF HOSP LOS	BMT EPISODE LOS	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE
136	\$2,954	\$0	\$518,947	\$517,254	\$481,337	NONE	119.0	152.0	\$853,728	\$579,793	\$576,839	\$576,839
51	\$4,194	\$0	\$128,619	\$128,540	\$115,942	NONE	89.0	143.0	\$354,146	\$189,063	\$184,869	\$184,869
134	\$9,039	\$0	\$79,709	\$78,408	\$66,304	NONE	53.0	62.0	\$235,334	\$137,019	\$127,980	\$127,980
STATUS	\$16,187	\$0	\$727,275	\$724,202	\$663,583				\$1,443,208	\$905,875	\$889,688	\$889,688
YEAR	\$196,646	\$355,837	\$5,870,617	\$5,533,478	\$4,941,133				\$9,083,794	\$7,595,128	\$7,042,645	\$7,042,645
BMT_TYPE	\$697,218	\$885,299	\$14,076,526	\$13,291,509	\$11,622,303				\$27,619,057	\$21,377,270	\$19,794,753	\$19,794,753

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

TYPE OF BMT=ALLOGENEIC TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=TRANSPLANT DEATH
(continued)[illegible]

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

HOSP PROVIDER ID NUM NAME	TRANSP HOSP DIAG CODE	TRANSP HOSP DIAG NAME (SHORT)	TRANSP HOSP TOP PROF CODE (IF DIFF)	TRANSP HOSP TOP PROF NAME (SHORT)
135 CHILDRENS HOSP OAKLAND	V428	TRANSPLANT STATUS NEC	2050	ACUTE MYELOID LEUKEMIA
181 UNIV OF CHICAGO HOSPITAL	1919	MALIG NEO BRAIN NOS	1916	MAL NEO CEREBELLUM NOS
34 STRONG MEMORIAL HOSPITAL	2058	MYELOID LEUKEMIA NEC	2050	ACUTE MYELOID LEUKEMIA
145 SWEDISH MEDICAL CTR	1940	MALIG NEOPL ADRENAL	1580	MAL NEO RETROPERITONEUM
178 HASTINGS MEDICAL CTR	2050	ACUTE MYELOID LEUKEMIA	2051	CHRONIC MYELOID LEUKEMIA
68 DUKE MEDICAL CTR	1985	SECONDARY MALIG NEO BONE	1749	MALIGN NEOPL BREAST NOS
31 UNIVERSITY MEDICAL CTR	20288	LYMPHOMAS NEC MULT	20280	LYMPHOMA NEC-EXTRNOD/NOS
5 VANDERBILT UNIV HOSPITAL	19889	SECONDARY MALIG NEO NEC		
212 MILWAUKEE CO MEDICAL CTR	2040	ACUTE LYMPHOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS

STATUS

HOSP TRANSP HOSP ID NUM # EPISODES	WHMC REFERRAL END DATE	HOSP REJECTION DATE	BMT DIAG	CHAMPUS DATE OF BMT	PREVIOUS HOSP ID NUM	TRANSP HOSP LOS	BMT EPISODE	LOS	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE	
135	1	NONE	NONE	ALIVE	NONE	85.0	108.0		\$219,309	\$237,070	\$235,952		
181	1	NONE	NONE	ALIVE	NONE	1.0	41.0		\$171,604	\$226,825	\$223,636		
34	1	NONE	NONE	ALIVE	NONE	109.0	263.0		\$311,853	\$221,978	\$207,430		
145	1	NONE	NONE	ALIVE	NONE	50.0	73.0		\$137,110	\$161,545	\$159,564		
178	1	NONE	NONE	16FEB91	NONE	43.0	106.0		\$202,881	\$142,135	\$141,383		
68	1	NONE	NONE	ALIVE	NONE	47.0	70.0		\$201,786	\$63,019	\$62,556		
31	1	NONE	NONE	ALIVE	NONE	37.0	68.0		\$141,729	\$53,738	\$53,141		
5	1	NONE	NONE	ALIVE	NONE	38.0	44.0		\$76,609	\$25,994	\$445		
212	1	NONE	NONE	ALIVE	NONE	35.0	35.0		\$131,908	\$24,830	\$24,786		
										\$1,594,789	\$1,157,134	\$1,108,893	

STATUS

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANS, NON-TRANS, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	GRAND TOTAL		GRAND TOTAL		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF 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*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

(continued)

HOSP ID NUM	TRANSF AMB PROF & DRUGS PNT PAY	TRANSF AMB PROF & DRUGS PD BOS	NON-TRANSF HOSP # EPISODES	NON-TRANSF HOSP # DAYS	NON-TRANSF HOSP # PROF SVC	NON-TRANSF HOSP # INDEP RX	NON-TRANSF HOSP TOTAL GOVT PAY	NON-TRANSF HOSP TOTAL PNT PAY	NON-TRANSF HOSP TOTAL PD BOS
135	\$0	\$0	7	23	117	0	\$47,757	\$827	\$0
181	\$77	\$0	17	40	541	9	\$152,325	\$2,061	\$0
34	\$47	\$0	5	154	29	91	\$154,812	\$12,430	\$0
145	\$228	\$0	5	23	165	0	\$49,397	\$1,333	\$0
178	\$0	\$0	8	63	10	0	\$38,339	\$462	\$0
68	\$1	\$0	8	23	113	11	\$20,281	\$321	\$0
31	\$31	\$0	7	31	23	0	\$18,462	\$444	\$0
5	\$0	\$470	1	6	1	4	\$117	\$6,078	\$3,232
212	\$44	\$0	0	0	0	0	\$0	\$0	\$0
STATUS	\$428	\$470	58	363	999	115	\$481,490	\$23,956	\$3,232

HOSP ID NUM	NON-TRANSF HOSP # AMB PROF SVC	NON-TRANSF HOSP # AMB RX	NON-TRANSF AMB PROF & DRUGS GOVT PAY	NON-TRANSF AMB PROF & DRUGS PNT PAY	NON-TRANSF AMB PROF & DRUGS PD BOS
135	27	0	\$1,835	\$58	\$0
181	562	1	\$56,545	\$1,000	\$0
34	26	37	\$6,253	\$214	\$0
145	95	0	\$2,526	\$0	\$0
178	82	0	\$3,025	\$218	\$0
68	6	0	\$554	\$0	\$0
31	21	0	\$612	\$2	\$0
5	1	1	\$60	\$0	\$130
212	0	0	\$0	\$0	\$0
STATUS	820	39	\$71,410	\$1,492	\$130

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HOSP PROVIDER ID NUM NAME	TRANSP HOSP DIAG CODE	TRANSP HOSP DIAG NAME (SHORT)	TRANSP HOSP TOP PROF CODE (IF DIFF)	TRANSP HOSP TOP PROF NAME (SHORT)
175 MD ANDERSON HOSPITAL	20191	HODGKINS DIS NOS HEAD	20190	HODGKINS NOS-EXTRNOD/NOS
23 FORBES HLTH CTR	20198	HODGKINS DIS NOS MULT	9778	POISON-MEDICINAL AGT NEC
190 BRYAN MEMORIAL HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	38900	CONDUCT HEARING LOSS NOS
48 PITT COUNTY MEMORIAL HOSPITAL	V581	CHEMOTHERAPY ENCOUNTER		

HOSP ID	HOSP NUM	TRANSP #	HOSP	WHMC	REFERRAL	HOSP END DATE	HOSP	BMT REJECTION	CHAMPUS DATE OF DEATH	PREVIOUS		TRANSP		BMT		GRAND TOTAL		GRAND TOTAL																																
										EPISODE	LOS	EPISODE	LOS	EPISODE	LOS	BMT	EPISODE		BMT	EPISODE	LOS	BMT	EPISODE	LOS	BMT	EPISODE	LOS																							
175	1	1	NONE	26JUL89	NONE	26JUL89	NONE	NONE	20.0	20.0	20.0	20.0	20.0	20.0	20.0	20.0	\$63,948	\$69,713	\$5,591																															
																				23	1	NONE	28NOV88	NONE	25.0	25.0	25.0	25.0	25.0	25.0	25.0	25.0	\$114,589	\$39,376	\$36,381															
																																				190	1	NONE	03APR89	NONE	33.0	33.0	33.0	33.0	33.0	33.0	33.0	\$54,789	\$10,110	\$6,817

STATUS	YEAR	4	13	NONE	26JUL89	NONE	26JUL89	NONE	20.0	20.0	20.0	20.0	20.0	20.0	20.0	20.0	\$290,540	\$127,954	\$57,372																															
																				13	1	NONE	03APR89	NONE	33.0	33.0	33.0	33.0	33.0	33.0	33.0	33.0	33.0	\$1,885,329	\$1,285,088	\$1,166,265														

HOSP ID	HOSP NUM	GRAND TOTAL BMT EPISODE PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANSF HOSP ALL PAYMENTS*	TRANSF HOSP TOTAL GOVT PAY	TRANSF HOSP INST GOVT PAY	TRANSF HOSP INST PNT PAY	TRANSF HOSP INST PD BOS	TRANSF HOSP #	TRANSF INDEP RX	TRANSF HOSP INDEP DRUGS GOVT PAY
175		\$481	\$63,641	\$62,239	\$2,345	\$0	\$0	\$56,124	0		\$0
23		\$2,995	\$0	\$31,984	\$31,974	\$31,943	\$0	\$0	0		\$0
190		\$3,293	\$0	\$9,986	\$6,730	\$1,643	\$0	\$0	0		\$0
48		\$172	\$0	\$7,671	\$7,621	\$7,471	\$0	\$0	5		\$150
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STATUS		\$6,941	\$63,641	\$111,880	\$48,670	\$41,057	\$0	\$56,124	5		\$150
YEAR		\$35,711	\$83,112	\$671,380	\$589,637	\$553,455	\$0	\$71,457	23		\$286

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TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 89 PNT MORTALITY STATUS=TRANSPLANT DEATH
(continued)

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***NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

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ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

HOSP PROVIDER ID NUM NAME	TRANSP HOSP DIAG CODE	TRANSP HOSP DIAG NAME (SHORT)	TRANSP HOSP TOP PROF CODE (IF DIFF)	TRANSP HOSP TOP PROF NAME (SHORT)
62 JOHNS HOPKINS HOSPITAL	2050	ACUTE MYELOID LEUKEMIA		
146 FRED HUTCHINSON CANCER CTR	2051	CHRONIC MYELOID LEUKEMIA	1940	MALIGN NEOPL ADRENAL
119 HASTINGS MEDICAL CTR	7806	PYREXIA UNKNOWN ORIGIN	20280	LYMPHOMA NEC-EXTRNOD/NOS
164 OK STATE UNIV HOSPITAL	4610	AC MAXILLARY SINUSITIS	20190	HODGKINS NOS-EXTRNOD/NOS
47 FRED HUTCHINSON CANCER CTR	2050	ACUTE MYELOID LEUKEMIA		
217 CHILDRENS HOSP STANFORD	20288	LYMPHOMAS NEC MULT	V428	TRANSPLANT STATUS NEC
163 TULANE MEDICAL CTR	38900	CONDUCT HEARING LOSS NOS	2775	MUCOPOLYSACCHARIDOSIS
151 JOHNS HOPKINS HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	5188	LUNG DISEASE NEC
125 SHANDS HOSPITAL	1952	MALIG NEO ABDOMEN	1940	MALIGN NEOPL ADRENAL
76 STANFORD UNIV HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	2078	SPECIFIED LEUKEMIA NEC
155 BEAR COUNTY HOSPITAL DIST	20080	MIX LYMPHSAR-EXTRNOD/NOS	4730	CHR MAXILLARY SINUSITIS
142 BARNES HOSPITAL	20158	HODG NODUL SCLERO MULT		
46 GEISINGER MEDICAL CTR	2050	ACUTE MYELOID LEUKEMIA	2080	ACUTE LEUKEMIA NOS
12 UNIV OF VA HOSPITAL	20196	HODGKINS DIS NOS PELVIC	20190	HODGKINS NOS-EXTRNOD/NOS

STATUS

HOSP TRANSP HOSP ID NUM # EPISODES	WHMC REFERRAL END DATE	HOSP END DATE	BMT REJECTION DIAG	CHAMPUS DATE OF BMT DEATH	PREVIOUS HOSP ID NUM	TRANSP HOSP LOS	BMT EPISODE LOS	GRAND TOTAL BMT EPISODE ALL BILLINGS*	GRAND TOTAL BMT EPISODE ALL PAYMENTS*	GRAND TOTAL BMT EPISODE GOVT PAY*
62	1	NONE	NONE	ALIVE	NONE	0.0	118.0	\$294,876	\$340,863	\$339,196
146	1	NONE	NONE	ALIVE	NONE	67.0	84.0	\$242,658	\$239,791	\$237,865
119	1	NONE	NONE	ALIVE	NONE	43.0	47.0	\$205,555	\$231,165	\$231,140
164	1	NONE	NONE	ALIVE	NONE	49.0	49.0	\$180,304	\$180,371	\$539
47	1	REFERRED	NONE	ALIVE	NONE	38.0	48.0	\$237,121	\$178,938	\$174,522
217	1	NONE	NONE	ALIVE	NONE	36.0	40.0	\$157,124	\$177,613	\$175,108
163	1	NONE	NONE	ALIVE	NONE	45.0	52.0	\$139,688	\$158,390	\$155,014
151	1	NONE	NONE	ALIVE	NONE	84.0	86.0	\$129,368	\$145,889	\$144,955
125	1	NONE	NONE	ALIVE	NONE	31.0	62.0	\$133,743	\$136,296	\$134,875
76	1	NONE	NONE	ALIVE	NONE	34.0	69.0	\$182,481	\$129,540	\$107,504
155	1	NONE	NONE	09AUG91	NONE	34.0	67.0	\$138,219	\$91,637	\$16,072
142	1	NONE	NONE	ALIVE	NONE	30.0	34.0	\$83,194	\$82,645	\$20,681
46	1	NONE	NONE	ALIVE	NONE	99.0	110.0	\$84,196	\$40,093	\$37,712
12	1	NONE	NONE	ALIVE	NONE	38.0	38.0	\$134,961	\$36,937	\$33,889
									\$2,343,488	\$2,170,168
									\$1,809,072	

STATUS 14

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----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP IID NUM	GRAND TOTAL		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP		TRANSF HOSP																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
	BMT EPISODE	PNT PAY*	BMT EPISODE	PD BOS*	TOTAL	GOVT PAY	HOSP INST	GOVT PAY	HOSP INST	PNT PAY	HOSP INST	PD BOS	HOSP INST	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC	TRANSF HOSP	PROF SVC	# AMB	TRANSF HOSP	PROF SVC

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

(continued)

HOSP ID NUM	TRANSF AMB PROF & DRUGS PNT PAY	TRANSF AMB PROF & DRUGS PD BOS	NON-TRANSF HOSP # EPISODES	NON-TRANSF HOSP # DAYS	NON-TRANSF HOSP # PROF SVC	NON-TRANSF HOSP # INDEP RX	NON-TRANSF HOSP TOTAL GOVT PAY	NON-TRANSF HOSP TOTAL PNT PAY	NON-TRANSF HOSP TOTAL PD BOS
62	\$37	\$0	17	118	485	0	\$331,433	\$1,065	\$0
146	\$215	\$0	7	17	338	0	\$71,590	\$1,169	\$0
119	\$0	\$0	3	4	303	0	\$34,285	\$25	\$0
164	\$28	\$2,351	0	0	0	0	\$0	\$0	\$0
47	\$8	\$0	3	10	311	0	\$30,728	\$1,153	\$0
217	\$0	\$0	1	4	74	0	\$24,570	\$543	\$0
163	\$204	\$0	3	7	68	4	\$9,959	\$1,603	\$892
151	\$0	\$0	2	2	133	0	\$7,559	\$525	\$0
125	\$2	\$0	8	31	643	2	\$51,070	\$387	\$0
76	\$5,500	\$0	3	35	163	0	\$44,164	\$12,048	\$0
155	\$0	\$700	4	33	23	0	\$13,725	\$130	\$54,255
142	\$0	\$0	1	4	0	0	\$377	\$3,288	\$3,288
46	\$567	\$0	2	11	35	0	\$19,407	\$64	\$0
12	\$596	\$0	0	0	0	0	\$0	\$0	\$0
STATUS	\$7,157	\$3,051	54	276	2,576	6	\$638,867	\$22,000	\$58,435

HOSP ID NUM	NON-TRANSF HOSP # AMB PROF SVC	NON-TRANSF HOSP # AMB RX	NON-TRANSF AMB PROF & DRUGS GOVT PAY	NON-TRANSF AMB PROF & DRUGS PNT PAY	NON-TRANSF AMB PROF & DRUGS PD BOS
62	132	0	\$4,206	\$565	\$0
146	98	0	\$11,600	\$96	\$0
119	0	0	\$0	\$0	\$0
164	0	0	\$0	\$0	\$0
47	183	0	\$4,347	\$786	\$0
217	0	0	\$0	\$0	\$0
163	74	13	\$4,257	\$424	\$0
151	1	0	\$114	\$0	\$0
125	274	8	\$13,001	\$1,032	\$0
76	38	0	\$2,990	\$2,176	\$0
155	4	0	\$251	\$0	\$109
142	2	0	\$46	\$15	\$0
46	32	0	\$1,772	\$377	\$0
12	0	0	\$0	\$0	\$0
STATUS	838	21	\$42,584	\$5,471	\$109

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

HOSP PROVIDER	TRANSF HOSP	TRANSF HOSP	TRANSF HOSP
ID NUM NAME	DIAG CODE	DIAG NAME	TOP PROF NAME
	(SHORT)	(SHORT)	(IF DIFF)

116 UNIV OF MINN HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	LYMPHOMA NEC-EXTRNOD/NOS
59 H IFF MOFFITT CANCER CTR	20288	LYMPHOMAS NEC MULT	20280

HOSP ID	HOSP NUM	HOSP #	HOSP	WHMC	HOSP REFERRAL	HOSP DATE	HOSP	BMT REJECTION	BMT DIAG	CHAMPUS DATE OF DEATH	PREVIOUS BMT	HOSP ID	NUM	TRANSP LOS	HOSP LOS	BMT EPI	LOS	GRAND TOTAL BMT EPI	GRAND TOTAL ALL PAYMENTS*	GRAND TOTAL BMT EPI	GRAND TOTAL GOVT PAY*				
116	1	1	NONE	23MAY90	NONE	01SEP90	NONE	36.0	70.0									\$146,210	\$198,496	\$196,262					
59	1	1	NONE	16MAY90	NONE	27FEB91	NONE	42.0	98.0									\$326,007	\$159,690	\$142,002					
																			\$472,217	\$358,186	\$338,264				
STATUS																			2						

ID	HOSP	NUM	GRAND TOTAL		GRAND TOTAL BMT EPICODE	PD BOS*	TRANSF HOSP TOTAL GOVT PAY	TRANSF HOSP GOVT PAY	TRANSF HOSP INST GOVT PAY	TRANSF HOSP INST PNT PAY	TRANSF HOSP INST PD BOS	TRANSF HOSP #	TRANSF HOSP INDEP DRUGS GOVT PAY
			BMT EPICODE	PNT PAY*									
	116		\$2,234	\$0	\$0		\$99,223	\$90,980	\$0	\$0	0		\$0
	59		\$17,688	\$0	\$0		\$51,036	\$39,336	\$0	\$0	2		\$230
STATUS			\$19,922	\$0	\$0		\$150,259	\$130,316	\$0	\$0	2		\$230

ID	HOSP NUM	TRANSF HOSP INDEP DRUGS PNT PAY	TRANSF HOSP INDEP DRUGS PD BOS	TRANSF HOSP # PROF SVC	TRANSF HOSP PROF SERV GOVT PAY	TRANSF HOSP PROF SERV PD BOS	TRANSF HOSP # AMB	TRANSF HOSP PROF SVC	TRANSF HOSP # AMB RX	TRANSF HOSP PROF & DRUGS GOV'T PAY
	116	\$0	\$0	74	\$8,243	\$30		\$0	3	\$162
	59	\$77	\$0	256	\$11,470	\$543		\$0	48	\$1,285
STATUS		\$77	\$0	330	\$19,713	\$573		\$0	51	\$1,447

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

(continued)

TRANSFERS TO NON-TRANSFERS									
HOSP		TRANSFERS		NON-TRANSFERS		NON-TRANSFERS		NON-TRANSFERS	
ID	NUM	PROF	PD	PROF	PD	PROF	PD	PROF	PD
ID	NUM	PROF	PD	PROF	PD	PROF	PD	PROF	PD
116	59	\$41	\$0	8	34	771	0	\$95,006	\$1,970
		\$248	\$0	4	56	214	12	\$48,645	\$7,767
STATUS		\$289	\$0	12	90	985	12	\$143,651	\$9,737
HOSP		NON-TRANSFERS		NON-TRANSFERS		NON-TRANSFERS		NON-TRANSFERS	
ID	NUM	PROF	PD	PROF	PD	PROF	PD	PROF	PD
ID	NUM	PROF	PD	PROF	PD	PROF	PD	PROF	PD
116	59	26	0	\$1,871	\$193	\$0	\$0	\$0	\$0
		588	27	\$41,036	\$9,053	\$0	\$0	\$0	\$0
STATUS		614	27	\$42,907	\$9,246	\$0	\$0	\$0	\$0

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

ID	HOSP PROVIDER NUM NAME	TRANSP HOSP DIAG CODE	TRANSP HOSP DIAG NAME (SHORT)	TRANSP HOSP TOP PROF CODE (IF DIFF)	TRANSP HOSP TOP PROF NAME (SHORT)	TRANSP STATUS	NEC
156	UNIV OF MINN HOSPITAL	2040	ACUTE LYMPHOID LEUKEMIA	V428		TRANSPLANT	
24	BARNES HOSPITAL	20288	LYMPHOMAS NEC MULT	7102		SICC	SYNDROME
71	HASTINGS MEDICAL CTR	20158	HODG NODUL SCLERO MULT				

ID	HOSP	HOSP #	HOSP	WHMC	HOSP	END DATE	BMT REJECTION	CHAMPUS DATE OF DEATH	PREVIOUS		TRANSP		BMT		GRAND TOTAL BMT EPIISODE ALL BILLINGS*	GRAND TOTAL BMT EPIISODE ALL PAYMENTS*	GRAND TOTAL BMT EPIISODE GOVT PAY*
									BMT ID	NUM	HOSP	LOS	LOS	LOS			
156	1	1	NONE	06SEP90	NONE	NONE	39.0	120.0							\$329,721	\$281,891	\$274,163
24	1	1	NONE	01JUN90	NONE	NONE	51.0	61.0							\$239,561	\$228,345	\$7,797
71	1	1	NONE	18NOV89	NONE	NONE	12.0	18.0							\$47,670	\$26,927	\$26,725

\$616,952	\$537,163	\$308,685
\$3,432,657	\$3,065,517	\$2,456,021

HOSP ID	NUM	GRAND TOTAL BMT	EPISODE PNT PAY*	GRAND TOTAL PD BOS*	TRANSP HOSP ALL PAYMENTS*	TRANSP HOSP GOVT PAY	TRANSP HOSP INST GOVT PAY	TRANSP HOSP INST PNT PAY	TRANSP HOSP INST PD BOS	#	TRANSP HOSP INDEP RX	TRANSP HOSP INDEP DRUGS GOVT PAY
156		\$7,728		\$0	\$142,565	\$136,602	\$123,846	\$0	\$0	0		\$0
24		\$2,185		\$218,363	\$199,303	\$986	\$0	\$0	\$197,008	0		\$0
71		\$202		\$0	\$14,661	\$14,661	\$14,661	\$0	\$0	0		\$0
<hr/>												
STATUS		\$10,115		\$218,363	\$356,529	\$152,249	\$138,507	\$0	\$197,008	0		\$0
YEAR		\$75,805		\$533,691	\$1,871,494	\$1,401,691	\$1,232,947	\$0	\$449,696	25		\$703

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 90 PNT MORTALITY STATUS=TRANSPLANT DEATH
(continued)

[illegible]

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

HOSP PROVIDER ID NUM NAME	TRANSF HOSP DIAG CODE	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP PROF CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)
150 MEMORIAL HOSPITAL FOR CANCER	0389	SEPTICEMIA NOS	1940	MALIGN NEOPL ADRENAL
102 CHILDRENS HOSPITAL AT STANFORD	V429	TRANSPLANT STATUS NOS	1940	MALIGN NEOPL ADRENAL
197 HOTEL DIEU HOSPITAL	20190	HODGKINS NOS-EXTRNOD/NOS		
74 BAYLOR UNIV MEDICAL CTR	2050	ACUTE MYELOID LEUKEMIA	2049	LYMPHOID LEUKEMIA NOS
172 SANTA ROSA HOSPITAL	V581	CHEMOTHERAPY ENCOUNTER	2089	LEUKEMIA-UNSPEC CELL NOS
118 DUKE MEDICAL CTR	V1062	HX OF MYELOID LEUKEMIA	2060	ACUTE MONOCYTIC LEUKEMIA
117 DUKE MEDICAL CTR	2050	ACUTE MYELOID LEUKEMIA	2080	ACUTE LEUKEMIA NOS
154 LOMA LINDA UNIVERSITY MEDICAL CENTER	2050	ACUTE MYELOID LEUKEMIA	2051	CHRONIC MYELOID LEUKEMIA
189 UNIV OF SC MEDICAL CTR	2050	ACUTE MYELOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
157 ST JUDE CHILDRENS HOSPITAL	1580	MAL NEO RETROPERITONEUM	V676	COMB TREATMENT FOLLOW-UP
38 DUKE MEDICAL CTR	1963	MAL NEO LYPH-AXILLA/ARM	1749	MALIGN NEOPL BREAST NOS
140 UNIV OF SC MEDICAL CTR	20011	LYMPHOSARCOMA HEAD	2040	ACUTE LYMPHOID LEUKEMIA
133 SANTA ROSA HOSPITAL	1985	SECONDARY MALIGN NEO BONE	1920	MAL NEO CRANIAL NERVES
193 EMORY UNIV HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	7813	LACK OF COORDINATION
223 PLEASANT VALLEY HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
41 SWEDISH MEDICAL CTR	20158	HODG NODUL SCLERO MULT	20190	HODGKINS NOS-EXTRNOD/NOS
121 SHANDS HOSPITAL	20193	HODGKINS DIS NOS ABDOM	20190	HODGKINS NOS-EXTRNOD/NOS
36 HARBORVIEW MEDICAL CTR	20283	LYMPHOMAS NEC ABDOM	20280	LYMPHOMA NEC-EXTRNOD/NOS
83 HASTINGS MEDICAL CTR	20008	RETICULOSARCOMA MULT	20280	LYMPHOMA NEC-EXTRNOD/NOS
69 VANDERBILT UNIV HOSPITAL	20208	NODULAR LYMPHOMA MULT	20280	LYMPHOMA NEC-EXTRNOD/NOS
17 HASTINGS MEDICAL CTR	20168	HODGKINS MIX CELL MULT	20190	HODGKINS NOS-EXTRNOD/NOS
52 EMORY UNIV HOSPITAL	20150	NODUL SCLEROS-EXTRND/NOS	20190	HODGKINS NOS-EXTRNOD/NOS
214 CHILDRENS HOSP OF L A	20400	ACUTE LYMPHOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA

STATUS

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID	TRANS #	HOSP EPISODES	WHMC REFERRAL	HOSP END DATE	BMT REJECTION	CHAMPUS DATE OF DEATH	PREVIOUS BMT HOSP ID	TRANS HOSP LOS	BMT EPISODE LOS	GRAND TOTAL BMT EPISODE ALL BILLINGS*	GRAND TOTAL BMT EPISODE ALL PAYMENTS*	GRAND TOTAL BMT EPISODE GOVT PAY*
150	1	1	NONE	16JAN91	NONE	ALIVE	NONE	94.0	188.0	\$299,947	\$397,788	\$365,012
102	1	1	NONE	10DEC90	NONE	ALIVE	NONE	38.0	72.0	\$337,064	\$347,694	\$341,897
197	1	1	NONE	09JUL91	NONE	ALIVE	NONE	71.0	74.0	\$339,783	\$338,298	\$2,342
74	1	1	NONE	24DEC90	NONE	ALIVE	NONE	23.0	26.0	\$459,757	\$316,657	\$14,653
172	1	1	NONE	01JUL91	NONE	ALIVE	NONE	56.0	100.0	\$408,251	\$297,748	\$294,433
118	1	1	NONE	15SEP91	NONE	ALIVE	NONE	188.0	208.0	\$259,368	\$248,951	\$243,427
117	1	1	NONE	11NOV90	NONE	ALIVE	NONE	42.0	72.0	\$257,199	\$240,447	\$10,432
154	1	1	NONE	05JUL91	NONE	ALIVE	NONE	46.0	94.0	\$385,681	\$214,529	\$199,274
189	1	1	NONE	04DEC90	SEC HOSP	ALIVE	NONE	42.0	84.0	\$241,944	\$182,437	\$5,308
157	1	1	NONE	07JAN91	NONE	ALIVE	NONE	33.0	54.0	\$127,054	\$168,728	\$166,942
38	1	1	NONE	10MAR91	NONE	ALIVE	NONE	27.0	53.0	\$138,649	\$154,229	\$149,483
140	1	1	NONE	12DEC90	NONE	ALIVE	NONE	42.0	83.0	\$155,977	\$142,188	\$2,889
133	1	1	NONE	18OCT90	NONE	ALIVE	NONE	55.0	64.0	\$176,601	\$137,734	\$136,737
193	1	1	NONE	24APR91	NONE	ALIVE	NONE	51.0	102.0	\$202,232	\$136,118	\$135,257
223	1	1	NONE	16APR91	NONE	ALIVE	NONE	25.0	45.0	\$176,040	\$115,604	\$114,320
41	1	1	NONE	18MAR91	NONE	ALIVE	NONE	68.0	68.0	\$215,831	\$89,047	\$1,537
121	1	1	NONE	28JAN91	NONE	ALIVE	NONE	32.0	47.0	\$160,058	\$87,055	\$73,817
36	1	1	NONE	13AUG91	NONE	ALIVE	NONE	48.0	50.0	\$85,437	\$86,978	\$85,975
83	1	1	NONE	13AUG91	NONE	ALIVE	NONE	25.0	25.0	\$97,417	\$82,883	\$74,497
69	1	1	NONE	16NOV90	NONE	ALIVE	NONE	30.0	41.0	\$93,199	\$81,579	\$40,996
17	1	1	NONE	22JAN91	NONE	ALIVE	NONE	42.0	42.0	\$117,146	\$67,310	\$60,958
52	1	1	NONE	10JUN91	NONE	ALIVE	NONE	33.0	33.0	\$58,054	\$43,732	\$43,181
214	1	1	NONE	30SEP91	NONE	ALIVE	NONE	67.0	67.0	\$435,325	\$13,244	\$9,326
-----											\$3,990,978	\$2,572,693
STATUS											23	

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANS, NON-TRANS, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
 ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
 TOTAL PATIENT TREATMENT EPISODES
 INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
 HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
 (continued)

HOSP ID	NUM	GRAND TOTAL BMT EPISODE PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANSB HOSP ALL PAYMENTS*	TRANSB HOSP TOTAL GOVT PAY	TRANSB HOSP GOVT PAY	TRANSB HOSP PNT PAY	TRANSB HOSP HOSP INST PNT PAY	TRANSB HOSP HOSP INST PD BOS	TRANSB HOSP # INDEP RX	TRANSB HOSP INDEP DRUGS GOVT PAY
150		\$32,776	\$0	\$178,098	\$159,460	\$144,490	\$0	\$0	\$0	0	\$0
102		\$5,797	\$0	\$199,058	\$197,607	\$165,290	\$0	\$0	\$0	0	\$0
197		\$8,566	\$327,390	\$320,438	\$169	\$0	\$0	\$319,871	\$0	0	\$0
74		\$5,373	\$296,631	\$292,394	\$1,441	\$0	\$0	\$288,919	\$0	0	\$0
172		\$3,315	\$0	\$202,744	\$202,118	\$197,315	\$0	\$0	\$0	0	\$0
118		\$5,524	\$0	\$223,123	\$220,619	\$207,051	\$0	\$0	\$0	0	\$0
117		\$13,847	\$216,168	\$191,888	\$469	\$4	\$0	\$183,142	\$0	20	\$8
154		\$15,255	\$0	\$54,493	\$50,384	\$34,852	\$0	\$0	\$0	1	\$12
189		\$123,285	\$53,844	\$3,228	\$709	\$0	\$0	\$0	\$0	0	\$0
157		\$1,786	\$0	\$96,760	\$96,555	\$89,221	\$0	\$0	\$0	0	\$0
38		\$4,746	\$0	\$89,942	\$89,252	\$79,310	\$0	\$0	\$0	0	\$0
140		\$73,702	\$65,597	\$47,024	\$549	\$0	\$0	\$45,249	\$0	0	\$0
133		\$997	\$0	\$128,608	\$128,091	\$119,643	\$0	\$0	\$0	0	\$0
193		\$861	\$0	\$52,618	\$52,581	\$46,105	\$0	\$0	\$0	14	\$1,256
223		\$1,284	\$0	\$63,349	\$62,377	\$50,279	\$0	\$0	\$0	0	\$0
41		\$0	\$87,510	\$84,108	\$457	\$0	\$0	\$79,870	\$0	0	\$0
121		\$5,984	\$7,254	\$48,070	\$46,182	\$40,735	\$0	\$0	\$0	0	\$0
36		\$1,003	\$0	\$63,686	\$63,587	\$55,719	\$0	\$0	\$0	0	\$0
83		\$8,386	\$0	\$72,408	\$66,784	\$47,014	\$0	\$0	\$0	0	\$0
69		\$11,710	\$28,874	\$52,984	\$36,324	\$31,448	\$0	\$15,000	\$0	0	\$0
17		\$6,352	\$0	\$55,779	\$52,325	\$42,053	\$0	\$0	\$0	0	\$0
52		\$551	\$0	\$42,000	\$41,566	\$37,891	\$0	\$0	\$0	0	\$0
214		\$2,871	\$1,047	\$10,640	\$7,583	\$0	\$0	\$0	\$0	0	\$0

STATUS		\$333,971	\$1,084,315	\$2,573,440	\$1,577,189	\$1,388,420	\$0	\$932,051	\$0	35	\$1,276

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(continued)

ID	HOSP	TRANSP HOSP INDEP DRUGS		TRANSP HOSP INDEP DRUGS PD BOS	TRANSP HOSP # PROF SVC	TRANSP HOSP PROF SERV		TRANSP HOSP PNT PAY	TRANSP HOSP PROF SERV PD BOS	TRANSP HOSP # AMB		TRANSP HOSP # AMB RX	TRANSP AMB PROF & DRUGS	
		PNT PAY	GOVT PAY			PROF PAY	PROF SVC			GOVT PAY	PROF PAY		GOVT PAY	
150		\$0		\$0	519	\$14,970	\$18,638		\$0	75	0		\$6,485	
102		\$0		\$0	83	\$32,317	\$1,451		\$0	19	0		\$26,574	
197		\$0		\$0	7	\$169	\$0		\$398	20	0		\$116	
74		\$0		\$0	34	\$1,441	\$0		\$2,034	0	0		\$0	
172		\$0		\$0	159	\$4,803	\$626		\$0	194	1		\$12,568	
118		\$0		\$0	212	\$13,568	\$2,504		\$0	136	0		\$4,987	
117		\$38		\$1,523	57	\$457	\$0		\$6,716	154	13		\$5,120	
154		\$4		\$0	290	\$15,520	\$4,105		\$0	0	0		\$0	
189		\$0		\$0	16	\$709	\$26		\$2,493	63	0		\$1,249	
157		\$0		\$0	93	\$7,334	\$205		\$0	104	0		\$10,454	
38		\$0		\$0	101	\$9,942	\$690		\$0	34	0		\$5,376	
140		\$0		\$0	43	\$549	\$6		\$1,220	87	0		\$960	
133		\$0		\$0	352	\$8,448	\$517		\$0	75	0		\$2,319	
193		\$37		\$0	97	\$5,220	\$0		\$0	90	0		\$21,730	
223		\$0		\$0	116	\$12,098	\$972		\$0	2	0		\$70	
41		\$0		\$0	145	\$457	\$0		\$3,781	24	0		\$1,080	
121		\$0		\$0	90	\$5,447	\$929		\$959	3	0		\$149	
36		\$0		\$0	121	\$7,868	\$99		\$0	83	0		\$11,892	
83		\$0		\$0	390	\$19,770	\$5,624		\$0	115	0		\$7,713	
69		\$0		\$0	114	\$4,876	\$1,660		\$0	82	0		\$942	
17		\$0		\$0	142	\$10,272	\$3,454		\$0	11	0		\$8,633	
52		\$0		\$0	63	\$3,675	\$434		\$0	36	0		\$1,615	
214		\$0		\$0	39	\$7,583	\$2,331		\$726	42	0		\$1,743	

STATUS		\$79		\$1,523	3,283	\$187,493	\$44,271		\$18,327	1,449	14		\$131,775	

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DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID	NUM	TRANSF AMB PROF & DRUGS PNT PAY	TRANSF AMB PROF & DRUGS PD BOS	NON-TRANSF HOSP # EPISODES	NON-TRANSF HOSP # DAYS	NON-TRANSF HOSP # PROF SVC	NON-TRANSF HOSP # INDEP RX	NON-TRANSF HOSP TOTAL GOVT PAY	NON-TRANSF HOSP TOTAL PNT PAY	NON-TRANSF HOSP TOTAL PD BOS
150		\$2,035	\$0	13	94	1,043	1	\$190,141	\$10,833	\$0
102		\$106	\$0	7	34	211	0	\$97,863	\$3,921	\$0
197		\$0	\$521	1	3	17	0	\$1,455	\$8,391	\$5,306
74		\$0	\$0	1	3	3	0	\$13,187	\$5,373	\$5,603
172		\$880	\$0	7	44	706	0	\$79,346	\$1,583	\$0
118		\$1,264	\$0	3	20	90	0	\$17,821	\$1,756	\$0
117		\$487	\$11,726	2	30	75	8	\$4,809	\$13,322	\$12,963
154		\$4	\$0	8	48	876	3	\$101,253	\$7,766	\$0
189		\$0	\$1,891	3	42	76	1	\$1,793	\$123,259	\$45,491
157		\$795	\$0	4	21	308	0	\$54,715	\$786	\$0
38		\$106	\$0	5	26	145	0	\$40,686	\$1,085	\$0
140		\$0	\$2,261	2	41	38	0	\$1,380	\$73,696	\$16,867
133		\$318	\$0	1	9	51	0	\$6,055	\$162	\$0
193		\$37	\$0	6	51	95	5	\$53,800	\$389	\$0
223		\$0	\$0	4	20	165	0	\$46,638	\$250	\$0
41		\$0	\$3,859	0	0	0	0	\$0	\$0	\$0
121		\$50	\$72	3	15	32	2	\$16,647	\$2,753	\$1,797
36		\$527	\$0	1	2	33	2	\$10,474	\$371	\$0
83		\$2,762	\$0	0	0	0	0	\$0	\$0	\$0
69		\$328	\$152	2	11	24	4	\$1,011	\$9,137	\$13,074
17		\$2,898	\$0	0	0	0	0	\$0	\$0	\$0
52		\$117	\$0	0	0	0	0	\$0	\$0	\$0
214		\$540	\$321	0	0	0	0	\$0	\$0	\$0
STATUS		\$13,254	\$20,803	73	514	3,988	26	\$739,074	\$264,833	\$101,101

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DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	NON-TRANSP # AMB PROF SVC	NON-TRANSP HOSP # AMB RX	NON-TRANSP AMB PROF & DRUGS GOVT PAY	NON-TRANSP AMB PROF & DRUGS PNT PAY	NON-TRANSP AMB PROF & DRUGS PD BOS
150	33	0	\$8,926	\$1,270	\$0
102	69	0	\$19,853	\$319	\$0
197	13	0	\$602	\$175	\$1,294
74	1	0	\$25	\$0	\$75
172	8	0	\$401	\$226	\$0
118	0	0	\$0	\$0	\$0
117	1	2	\$34	\$0	\$98
154	1,753	1	\$47,637	\$3,376	\$0
189	91	0	\$1,557	\$0	\$3,969
157	87	0	\$5,218	\$0	\$0
38	164	0	\$14,169	\$2,865	\$0
140	0	0	\$0	\$0	\$0
133	5	0	\$272	\$0	\$0
193	260	6	\$7,146	\$398	\$0
223	35	3	\$5,235	\$62	\$0
41	0	0	\$0	\$0	\$0
121	92	7	\$10,839	\$2,252	\$4,426
36	1	0	\$22	\$6	\$0
83	0	0	\$0	\$0	\$0
69	103	0	\$2,719	\$585	\$648
17	0	0	\$0	\$0	\$0
52	0	0	\$0	\$0	\$0
214	0	0	\$0	\$0	\$0
STATUS	2,716	19	\$124,655	\$11,534	\$10,510

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DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPISODE DEATH -----

HOSP PROVIDER ID NUM NAME	TRANSB HOSP DIAG CODE	TRANSB HOSP DIAG NAME (SHORT)	TRANSB HOSP TOP PROF CODE (IF DIFF)	TRANSB HOSP TOP PROF NAME (SHORT)
147 CHILDRENS HOSPITAL OF ORANGE	20400	ACUTE LYMPHOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
93 CHILDRENS HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	2089	LEUKEMIA-UNSPEC CELL NOS
50 GEORGIA BAPTIST MEDICAL CTR	20281	LYMPHOMAS NEC HEAD	20280	LYMPHOMA NEC-EXTRNOD/NOS
87 BAYLOR UNIV MEDICAL CTR	20192	HODGKINS DIS NOS THORAX	20190	HODGKINS NOS-EXTRNOD/NOS
82 HASTINGS MEDICAL CTR	1749	MALIGN NEOPL BREAST NOS	1970	SECONDARY MALIGN NEO LUNG

STATUS

HOSP #	TRANSB HOSP EPISODES	WPMC REFERRAL	HOSP END DATE	BMT REJECTION	CHAMPUS DATE OF BMT	PREVIOUS HOSP ID NUM	TRANSB HOSP LOS	EPISODE LOS	BMT LOS	GRAND TOTAL BMT EPISODE ALL BILLINGS*	GRAND TOTAL BMT EPISODE GOVT PAY*
147	1	NONE	14JUN91	NONE	20FEB92	NONE	46.0	102.0	102.0	\$709,857	\$514,337
93	1	NONE	22DEC90	NONE	24APR91	NONE	72.0	102.0	102.0	\$296,377	\$341,466
50	1	NONE	21JUN91	NONE	11MAY92	NONE	38.0	62.0	62.0	\$231,837	\$200,975
87	1	NONE	23SEP91	NONE	10JUN92	NONE	35.0	84.0	84.0	\$297,130	\$154,789
82	1	NONE	01JUN91	NONE	03JUL91	NONE	47.0	53.0	53.0	\$88,570	\$32,080
STATUS	5									\$1,623,771	\$1,243,647
											\$1,039,609

HOSP #	TRANSB HOSP EPISODES	GRAND TOTAL BMT EPISODE PD BOS*	TRANSB HOSP TOTAL GOVT PAY	TRANSB HOSP INST GOVT PAY	HOSP INST PNT PAY	TRANSB HOSP INST PD BOS	TRANSB HOSP INDEP DRUGS GOVT PAY
147	\$3,558	\$0	\$291,200	\$259,848	\$0	\$0	\$0
93	\$1,795	\$0	\$239,436	\$227,893	\$0	\$0	\$0
50	\$20,460	\$175,938	\$269	\$0	\$0	\$124,770	\$0
87	\$1,829	\$0	\$58,996	\$50,984	\$0	\$0	\$58
82	\$458	\$0	\$8,201	\$0	\$0	\$0	\$0
STATUS	\$28,100	\$175,938	\$598,102	\$538,725	\$0	\$124,770	\$58

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TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=EPIISODE DEATH

[illegible]

***NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

HCSCIA, FSH, TX 78234

HOSP PROVIDER ID NUM NAME	TRANSF HOSP DIAG CODE	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP PROF CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)
106 GEORGETOWN UNIV HOSPITAL	2050	ACUTE MYELOID LEUKEMIA	0389	SEPTICEMIA NOS
4 VANDERBILT UNIV HOSPITAL	19899	SECONDARY MALIGNANT NEOPLASIA		
28 CONCORD HOSPITAL	1625	MALIGNANT LOWER LOBE LUNG	1629	MALIGNANT BRONCHUS/LUNG NOS

HOSP ID	HOSP NUM	TRANSP #	HOSP	WHMC	HOSP REFERRAL	HOSP END DATE	BMT REJECTION	CHAMPUS DATE OF DEATH	PREVIOUS		TRANSP		BMT EPISODE LOS	GRAND TOTAL		GRAND TOTAL BMT EPISODE	GRAND TOTAL BMT EPISODE GOVT PAY*
									BMT	HOSP ID	NUM	LOS		BMT	EPISODE		
106	1			NONE	01JUN91	NONE		01JUN91	NONE		31.0		33.0	\$156,276	\$181,779	\$174,377	
4	1			NONE	16JAN91	NONE		16JAN91	NONE		20.0		20.0	\$85,263	\$80,162	\$87	
28	1			NONE	21MAY91	NONE		21MAY91	NONE		70.0		70.0	\$65,990	\$22,766	\$21,185	

STATUS	3													\$307,529	\$284,707	\$195,649	
YEAR	31													\$7,159,314	\$5,519,332	\$3,807,951	

HOSP ID	HOSP NUM	GRAND TOTAL BMT EPISODE PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANSP HOSP ALL PAYMENTS*	TRANSP HOSP TOTAL GOVT PAY	TRANSP HOSP INST GOVT PAY	TRANSP HOSP INST PNT PAY	TRANSP HOSP INST PD BOS	TRANSP HOSP # INDEP RX	TRANSP HOSP INDEP DRUGS GOVT PAY
106		\$7,402	\$0	\$164,675	\$161,378	\$145,503	\$0	\$0	0	\$0
4		\$0	\$80,075	\$79,152	\$0	\$0	\$0	\$79,152	0	\$0
28		\$1,581	\$0	\$21,946	\$20,551	\$12,957	\$0	\$0	0	\$0
<hr/>										
STATUS		\$8,983	\$80,075	\$265,773	\$181,929	\$158,460	\$0	\$79,152	0	\$0
YEAR		\$371,054	\$1,340,328	\$3,566,288	\$2,357,220	\$2,085,605	\$0	\$1,135,973	36	\$1,334

****NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.**

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 91 PNT MORTALITY STATUS=TRANSPLANT DEATH -----

(continued)

HOSP ID NUM	HOSP INDEP DRUGS PNT PAY	TRANS HOSP # PROF SVC	TRANS HOSP PROF SVC GOVT PAY	TRANS HOSP PROF SVC PNT PAY	TRANS HOSP PROF SVC PD BOS	TRANS HOSP PROF SVC # AMB	TRANS HOSP PROF RX # AMB RX	TRANS AMB PROF & DRUGS GOVT PAY
106	\$0	100	\$15,875	\$3,297	\$0	6	0	\$684
4	\$0	0	\$0	\$0	\$0	27	0	\$87
28	\$0	155	\$7,594	\$1,395	\$0	15	0	\$634

STATUS	\$0	255	\$23,469	\$4,692	\$0	48	0	\$1,405
YEAR	\$79	4,139	\$270,281	\$50,951	\$20,542	1,930	24	\$193,942

HOSP ID NUM	TRANS AMB PROF & DRUGS PNT PAY	NON-TRANS HOSP # EPISODES	NON-TRANS HOSP # DAYS	NON-TRANS HOSP # PROF SVC	NON-TRANS HOSP # INDEP RX	NON-TRANS HOSP GOVT PAY	NON-TRANS HOSP PNT PAY	NON-TRANS HOSP TOTAL HOSP PD BOS
106	\$321	1	2	9	0	\$12,315	\$3,784	\$0
4	\$0	0	0	0	0	\$0	\$0	\$0
28	\$186	0	0	0	0	\$0	\$0	\$0

STATUS	\$507	1	2	9	0	\$12,315	\$3,784	\$0
YEAR	\$15,162	105	681	5,431	48	\$1,074,217	\$290,853	\$144,386

HOSP ID NUM	NON-TRANS HOSP # AMB PROF SVC	NON-TRANS HOSP # AMB RX	NON-TRANS HOSP PROF & DRUGS GOVT PAY	NON-TRANS HOSP PROF & DRUGS PNT PAY	NON-TRANS HOSP PROF & DRUGS PD BOS	NON-TRANS HOSP PROF & DRUGS PNT PAY	NON-TRANS HOSP PROF & DRUGS PD BOS	NON-TRANS HOSP PROF & DRUGS PNT PAY
106	0	0	\$0	\$0	\$0	\$0	\$0	\$0
4	0	0	\$0	\$0	\$0	\$0	\$0	\$0
28	0	0	\$0	\$0	\$0	\$0	\$0	\$0

STATUS	0	0	\$0	\$0	\$0	\$0	\$0	\$0
YEAR	3,449	39	\$182,572	\$14,009	\$12,976	\$12,976	\$12,976	\$12,976

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANS, NON-TRANS, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----

HOSP PROVIDER ID NUM NAME	TRANSF HOSP DIAG CODE	TRANSF HOSP DIAG NAME (SHORT)	TRANSF HOSP TOP PROF CODE (IF DIFF)	TRANSF HOSP TOP PROF NAME (SHORT)
213 SANTA ROSA HOSPITAL	1940	MALIGN NEOPL ADRENAL	78609	RESPIRATORY ABNORM NEC
211 COOK FT WORTH CHLD MED CTR	1940	MALIGN NEOPL ADRENAL	2799	IMMUNE MECHANISM DIS NOS
199 CHILDRENS HOSPITAL	19889	SECONDARY MALIGN NEO NEC	19882	SECOND MALIGN NEO GENITAL
111 DUKE MEDICAL CTR	2050	ACUTE MYELOID LEUKEMIA	2060	ACUTE MONOCYTIC LEUKEMIA
138 VANDERBILT UNIV HOSPITAL	20400	ACUTE LYMPHOID LEUKEMIA	2040	ACUTE LYMPHOID LEUKEMIA
64 JOHNS HOPKINS HOSPITAL	20150	NOBUL SCLEROS-EXTRND/NOS	20190	HODGKINS NOS-EXTRND/NOS
16 ST LOUIS UNIV HOSPITAL	20192	HODGKINS DIS NOS THORAX	20190	HODGKINS NOS-EXTRND/NOS
123 OK STATE UNIV HOSPITAL	20500	ACUTE MYELOID LEUKEMIA	2050	ACUTE MYELOID LEUKEMIA
49 CAPE FEAR VALLEY MEDICAL CTR	20501	AC MYEL LEUK IN REMISSN	2050	ACUTE MYELOID LEUKEMIA
53 NC BAPTIST HOSPITAL	20280	LYMPHOMA NEC-EXTRND/NOS		
158 VANDERBILT UNIV HOSPITAL	1580	MAL NEO RETROPERITONEUM	1991	MALIGNANT NEOPLASM NOS
66 ST LUKES MEDICAL CTR	1963	MAL NEO LYMPH-AXILLA/ARM	1749	MALIGN NEOPL BREAST NOS
44 DUKE MEDICAL CTR	1970	SECONDARY MALIGN NEO LUNG	1749	MALIGN NEOPL BREAST NOS
1 MAINE MEDICAL CTR	20208	NODULAR LYMPHOMA MULT	20280	LYMPHOMA NEC-EXTRND/NOS
91 KENNETH NORRIS JR CANCER CTR	20020	BURKITT'S TUM-EXTRND/NOS	1985	SECONDARY MALIGN NEO BONE
18 METABOLIC MGMT PROGS	20301	MULT MYELOMA IN REMISSN	2030	MULTIPLE MYELOMA
81 FAIRFAX HOSPITAL	1748	MALIGN NEOPL BREAST NEC	1749	MALIGN NEOPL BREAST NOS

STATUS

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

(continued)

ID	HOSP #	TRANSP	HOSP	WHMC	REFERRAL	BMT		CHAMPUS	PREVIOUS		TRANSP		BMT		GRAND TOTAL		GRAND TOTAL	
						REJECTION	DIAG		DATE	OF	BMT	TRANSP	HOSP	LOS	EPISODE	LOS	ALL BILLINGS*	BMT EPISODE
213	1		1	NONE	15NOV91	NONE		ALIVE	NONE		70.0	74.0		\$278,098		\$312,127		\$305,916
211	1		1	NONE	24JUN92	NONE		ALIVE	NONE		44.0	83.0		\$256,669		\$311,336		\$304,729
199	1		1	NONE	24JUL92	NONE		ALIVE	NONE		65.0	70.0		\$570,886		\$301,253		\$298,854
111	1		1	NONE	15OCT91	NONE		ALIVE	NONE		115.0	155.0		\$474,697		\$254,293		\$248,707
138	1		1	NONE	10SEP92	NONE		ALIVE	NONE		44.0	76.0		\$212,370		\$241,532		\$238,584
64	1		1	NONE	10AUG92	NONE		ALIVE	NONE		69.0	69.0		\$179,811		\$211,263		\$183,886
16	1		1	NONE	27NOV91	NONE		ALIVE	NONE		62.0	62.0		\$445,671		\$188,900		\$178,317
123	1		1	NONE	26NOV91	NONE		ALIVE	NONE		28.0	99.0		\$206,557		\$170,053		\$168,486
49	1		1	NONE	05JAN92	NONE		ALIVE	NONE		128.0	214.0		\$322,686		\$165,031		\$155,019
53	1		1	NONE	20JAN92	NONE		ALIVE	NONE		28.0	72.0		\$217,885		\$157,230		\$4,205
158	1		1	NONE	15MAY92	NONE		ALIVE	NONE		31.0	64.0		\$144,546		\$154,624		\$154,144
66	1		1	NONE	27JUN92	NONE		ALIVE	NONE		24.0	32.0		\$161,390		\$126,119		\$121,264
44	1		1	NONE	22DEC91	NONE		ALIVE	NONE		25.0	27.0		\$110,578		\$121,703		\$2,931
1	1		1	NONE	17JUL92	NONE		ALIVE	NONE		25.0	34.0		\$90,676		\$113,280		\$3,703
91	1		1	NONE	10DEC91	NONE		ALIVE	NONE		16.0	18.0		\$97,152		\$98,337		\$1,568
18	1		1	NONE	29MAR92	NONE		ALIVE	NONE		35.0	44.0		\$60,036		\$53,608		\$8,413
81	1		1	NONE	29APR92	NONE		ALIVE	NONE		48.0	48.0		\$15,194		\$15,313		\$15
STATUS	17												\$3,844,902		\$2,996,002		\$2,378,741	

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSP, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
 ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
 TOTAL PATIENT TREATMENT EPISODES
 INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
 HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
 (continued)

HOSP ID	NUM	GRAND TOTAL BMT EPISODE PNT PAY*	GRAND TOTAL BMT EPISODE PD BOS*	TRANSB ALL PAYMENTS*	TRANSB TOTAL GOVT PAY	TRANSB HOSP INST GOVT PAY	TRANSB HOSP INST PNT PAY	TRANSB HOSP INST PD BOS	TRANSB HOSP INST # INDEP RX	TRANSB HOSP INST INDEP DRUGS	TRANSB HOSP INST GOVT PAY
213		\$6,211	\$0	\$281,867	\$278,073	\$261,551	\$0	\$0	0	\$0	\$0
211		\$6,607	\$0	\$138,748	\$138,107	\$127,963	\$0	\$0	0	\$0	\$0
199		\$2,399	\$0	\$264,943	\$263,633	\$246,506	\$0	\$0	0	\$0	\$0
111		\$5,586	\$0	\$140,956	\$137,631	\$120,311	\$0	\$0	0	\$0	\$0
138		\$2,948	\$0	\$113,682	\$113,682	\$99,799	\$0	\$0	3	\$200	\$0
64		\$27,377	\$0	\$157,997	\$142,526	\$124,145	\$0	\$0	0	\$0	\$0
16		\$10,583	\$0	\$138,431	\$136,363	\$126,428	\$0	\$0	0	\$0	\$0
123		\$1,567	\$0	\$99,766	\$99,365	\$85,835	\$0	\$0	0	\$0	\$0
49		\$10,012	\$0	\$112,921	\$106,309	\$99,075	\$0	\$0	21	\$369	\$0
53		\$18,958	\$134,066	\$76,654	\$1,649	\$0	\$0	\$62,941	10	\$0	\$0
158		\$480	\$0	\$77,279	\$77,279	\$66,267	\$0	\$0	0	\$0	\$0
66		\$4,855	\$0	\$65,587	\$65,580	\$53,085	\$0	\$0	0	\$0	\$0
44		\$11,744	\$107,028	\$93,687	\$1,018	\$501	\$0	\$88,961	0	\$0	\$0
1		\$15,918	\$93,659	\$70,981	\$188	\$0	\$0	\$69,422	0	\$0	\$0
91		\$20	\$96,749	\$89,599	\$134	\$100	\$0	\$89,064	0	\$0	\$0
18		\$880	\$44,315	\$9,143	\$4,612	\$0	\$0	\$0	0	\$0	\$0
81		\$0	\$15,298	\$15,134	\$0	\$0	\$0	\$14,744	0	\$0	\$0
STATUS		\$126,145	\$491,115	\$1,947,375	\$1,566,149	\$1,411,566	\$0	\$325,132	34	\$569	\$0

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSB, NON-TRANSB, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

HOSP I/D NUM	TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS		TRANSF HOSP INDEP DRUGS	
	HOSP INDEP DRUGS PNT PAY	PNT PAY	INDEP DRUGS PD BOS	PD BOS	# PROF SVC	PROF SVC	GOVT PAY	PROF SERV	PNT PAY	PROF SERV	PD BOS	PROF SERV	PD BOS	PROF SERV	# AMB	PROF SVC	# AMB RX	PROF & DRUGS GOV'T PAY
213	\$0	\$0	\$0	\$0	211	\$16,522	\$3,794	\$0	\$0	\$0	\$0	\$0	\$0	\$0	34	\$0	0	\$1,422
211	\$0	\$0	\$0	\$0	184	\$10,144	\$641	\$0	\$0	\$0	\$0	\$0	\$0	\$0	225	\$0	0	\$5,048
199	\$0	\$0	\$0	\$0	183	\$17,127	\$1,310	\$0	\$0	\$0	\$0	\$0	\$0	\$0	43	\$0	0	\$3,533
111	\$0	\$0	\$0	\$0	341	\$17,320	\$3,325	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0	\$0	0	\$0
138	\$0	\$0	\$0	\$0	88	\$13,683	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0	\$0	0	\$0
64	\$0	\$0	\$0	\$0	295	\$18,381	\$15,471	\$0	\$0	\$0	\$0	\$0	\$0	\$0	714	\$0	0	\$41,360
16	\$0	\$0	\$0	\$0	215	\$9,935	\$2,068	\$0	\$0	\$0	\$0	\$0	\$0	\$0	700	\$0	0	\$41,954
123	\$0	\$0	\$0	\$0	345	\$13,530	\$401	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0	\$0	0	\$0
49	\$70	\$0	\$0	\$0	595	\$6,865	\$6,542	\$0	\$0	\$0	\$0	\$0	\$0	\$0	397	\$0	2	\$10,704
53	\$0	\$0	\$408	\$0	72	\$1,649	\$11	\$0	\$0	\$0	\$0	\$0	\$0	\$0	232	\$11,645	15	\$869
158	\$0	\$0	\$0	\$0	140	\$11,012	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	45	\$0	2	\$6,146
66	\$0	\$0	\$0	\$0	51	\$12,495	\$7	\$0	\$0	\$0	\$0	\$0	\$0	\$0	173	\$0	0	\$23,669
44	\$0	\$0	\$0	\$0	54	\$517	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	88	\$0	0	\$1,766
1	\$0	\$0	\$0	\$0	27	\$188	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	3	\$0	0	\$0
91	\$0	\$0	\$0	\$0	6	\$34	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	13	\$401	0	\$237
18	\$0	\$0	\$0	\$0	207	\$4,612	\$830	\$0	\$0	\$0	\$0	\$0	\$0	\$0	290	\$3,701	0	\$3,672
81	\$0	\$0	\$0	\$0	4	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	7	\$390	0	\$15
STATUS	\$70	\$70	\$408	\$408	3,018	\$154,014	\$34,400	\$21,216	\$21,216	2,964	19	\$140,395						

***NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

HCSCIA, FSH, TX 78234

TYPE OF BMT=AUTOLOGOUS	TIME PERIOD=DISP FY 92	PNT MORTALITY STATUS=EPISODE SURVIVAL
(continued)		

HOSP ID NUM	TRANSF AMB PROF & DRUGS		TRANSF AMB PROF & DRUGS		NON-TRANSF HOSP # EPISODES	NON-TRANSF HOSP		NON-TRANSF HOSP # PROF SVC	NON-TRANSF HOSP # INDEP RX	NON-TRANSF HOSP TOTAL GOV'T PAY	NON-TRANSF HOSP TOTAL PNT PAY	NON-TRANSF HOSP TOTAL PD BOS
	PNT PAY	PD BOS	PD BOS	HOSP # DAYS		HOSP # INDEP RX	HOSP TOTAL GOV'T PAY					
213	\$283		\$0	4	3		187	0		\$26,323	\$2,134	\$0
211	\$90		\$0	39	12		978	33		\$143,574	\$5,130	\$0
199	\$40		\$0	5	2		68	0		\$27,095	\$802	\$0
111	\$0		\$0	40	5		494	3		\$64,609	\$1,692	\$0
138	\$0		\$0	32	8		425	5		\$72,890	\$1,412	\$0
64	\$11,906		\$0	0	0		0	0		\$0	\$0	\$0
16	\$8,515		\$0	0	0		0	0		\$0	\$0	\$0
123	\$0		\$0	71	8		270	0		\$64,336	\$844	\$0
49	\$2,691		\$0	86	4		484	33		\$32,720	\$187	\$0
53	\$48		\$16,892	44	2		111	24		\$760	\$18,874	\$24,162
158	\$0		\$0	33	7		224	4		\$67,599	\$229	\$0
66	\$345		\$0	8	4		63	0		\$19,972	\$3,130	\$0
44	\$27		\$6,678	2	1		7	0		\$130	\$11,717	\$7,053
1	\$10		\$5	9	4		61	0		\$2,777	\$15,908	\$20,901
91	\$0		\$1,009	2	1		8	0		\$526	\$20	\$3,240
1	\$50		\$15,504	9	1		0	0		\$0	\$0	\$24,609
81	\$0		\$164	0	0		0	0		\$0	\$0	\$0
STATUS	\$24,005		\$40,322	384	62		3,380	102		\$523,311	\$62,079	\$79,965

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE SURVIVAL -----
(continued)

HOSP ID NUM	NON-TRANSF HOSP # AMB PROF SVC	NON-TRANSF HOSP # AMB RX	NON-TRANSF AMB PROF & DRUGS GOVT PAY	NON-TRANSF AMB PROF & DRUGS PNT PAY	NON-TRANSF AMB PROF & DRUGS PD BOS
213	2	0	\$98	\$0	\$0
211	195	0	\$18,000	\$746	\$0
199	34	0	\$4,593	\$247	\$0
111	795	1	\$46,467	\$569	\$0
138	599	9	\$52,012	\$1,536	\$0
64	0	0	\$0	\$0	\$0
16	0	0	\$0	\$0	\$0
123	161	0	\$4,785	\$322	\$0
49	206	11	\$5,286	\$522	\$0
53	238	16	\$927	\$25	\$18,018
158	73	0	\$3,120	\$251	\$0
66	80	0	\$12,043	\$1,373	\$0
44	10	0	\$17	\$0	\$628
1	19	0	\$738	\$0	\$1,890
91	20	0	\$671	\$0	\$3,035
18	12	0	\$129	\$0	\$501
81	0	0	\$0	\$0	\$0
STATUS	2,444	37	\$148,886	\$5,591	\$24,072

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSP, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
INSTITUTIONAL, PROFESSIONAL, INDEPENDENT DRUG COSTS
HOSPITAL END DATE: FISCAL YEARS 1989 - JULY 1992

----- TYPE OF BMT=AUTOLOGOUS TIME PERIOD=DISP FY 92 PNT MORTALITY STATUS=EPISODE DEATH -----

HOSP PROVIDER
ID NUM NAME
20 MD ANDERSON HOSPITAL
20300 MULTIPLE MYELOMA
2030 MULTIPLE MYELOMA
TRANSF HOSP
DIAG CODE
20300
TRANSF HOSP
DIAG NAME
(SHORT)
MULTIPLE MYELOMA
TRANSF HOSP
TOP PROF CODE
(IF DIFF)
2030
TRANSF HOSP
TOP PROF NAME
(SHORT)
MULTIPLE MYELOMA

YEAR
BMT_TYPE

HOSP TRANSF HOSP	WHMC	HOSP	REJECTION	BMT	CHAMPUS	PREVIOUS	TRANSF	BMT	GRAND TOTAL	GRAND TOTAL	GRAND TOTAL
ID NUM # EPISODES	REFERRAL	END DATE	DIAG	DIAG	DATE OF BMT	HOSP ID NUM	HOSP LOS	LOS	ALL BILLINGS*	BMT EPISODE	BMT EPISODE
20	1	NONE	12MAR92	NONE	08MAY92	NONE	41.0	74.0	\$178,015	\$141,046	\$133,393
YEAR	18								\$4,022,917	\$3,137,048	\$2,512,134
BMT_TYPE	81								\$16,500,217	\$13,006,985	\$9,942,371
									\$44,119,274	\$34,384,255	\$29,737,124

HOSP TRANSF HOSP	WHMC	HOSP	REJECTION	BMT	CHAMPUS	PREVIOUS	TRANSF	BMT	GRAND TOTAL	GRAND TOTAL	GRAND TOTAL
ID NUM # EPISODES	REFERRAL	END DATE	DIAG	DIAG	DATE OF BMT	HOSP ID NUM	HOSP LOS	LOS	ALL BILLINGS*	BMT EPISODE	BMT EPISODE
20	1	NONE	12MAR92	NONE	08MAY92	NONE	41.0	74.0	\$178,015	\$141,046	\$133,393
YEAR	18								\$4,022,917	\$3,137,048	\$2,512,134
BMT_TYPE	81								\$16,500,217	\$13,006,985	\$9,942,371
									\$44,119,274	\$34,384,255	\$29,737,124

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

[illegible]

*NOTES: AMB BMT EPISODE PROF SERV/NON-TRANS BMT HOSP: 3 MONTHS PRE/12 MONTHS POST BMT EPISODES, BMT INST/TOP PROF SERV, BMT RELATED DISCHARGE DIAGNOSIS. TOTAL EPISODE ALL PAYERS: GOVERNMENT, PATIENT, OTH SRC. GRAND TOTAL ALL PAYMENTS: TRANSF, NON-TRANSF, AMB PAYMENTS. BMT EPISODE LOGIC CONTROLS FOR PRE/POST BMT TRANSFERS AND MAY INCLUDE INTER-HOSP TRANSFERS.

APPENDIX C

DEPARTMENT OF DEFENSE CHAMPUS

ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS

TOTAL PATIENT TREATMENT EPISODES

PROFESSIONAL SERVICES DETAILED WORKLOAD

HOSPITAL END DATE: OCTOBER 1988-JULY 1992

BMT TYPE: ALLOGENEIC BONE MARROW TRANSPLANTATION

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
99070	SPECIAL SUPPLIES	91	271	0	2,009	\$273,401.25	\$136.09	\$1,008.86	7.41
84999	CLINICAL CHEMISTRY TEST	84	210	0	1,939	\$222,257.13	\$114.62	\$1,058.37	9.23
71020	CHEST X-RAY	81	286	0	399	\$9,701.97	\$24.32	\$33.92	1.40
71010	CHEST X-RAY	76	321	0	656	\$12,808.42	\$19.53	\$39.90	2.04
90620	COMPREHENSIVE CONSULTATION	55	120	21	129	\$16,168.72	\$125.34	\$134.74	1.08
90015	OFFICE/OP VISIT, NEW, INTERM	54	104	245	286	\$21,244.68	\$74.28	\$204.28	2.75
76499	RADIOGRAPHIC PROCEDURE	53	86	0	189	\$31,376.13	\$166.01	\$364.84	2.20
90220	HOSPITAL CARE, NEW, COMPREH	50	68	5	68	\$8,773.29	\$129.02	\$129.02	1.00
90260	HOSPITAL VISIT, INTERMEDIATE	50	281	75	826	\$39,911.90	\$48.32	\$142.04	2.94
85095	BONE MARROW ASPIRATION	48	78	0	107	\$6,559.64	\$61.31	\$84.10	1.37
90280	HOSPITAL VISIT, COMPREHENSIVE	44	230	0	1,121	\$125,027.17	\$111.53	\$543.60	4.87
93010	ELECTROCARDIOGRAM REPORT	42	97	16	145	\$2,849.12	\$19.65	\$29.37	1.49
88304	TISSUE EXAM BY PATHOLOGIST	41	67	0	86	\$4,223.75	\$49.11	\$63.04	1.28
90060	OFFICE/OP VISIT, EST, INTERM	39	57	75	75	\$2,401.25	\$32.02	\$42.13	1.32
90250	HOSPITAL VISIT, LIMITED	36	152	48	743	\$30,740.34	\$41.37	\$202.24	4.89
90270	HOSPITAL VISIT, EXTENDED	36	255	98	788	\$54,999.92	\$69.80	\$215.69	3.09
88313	SPECIAL STAINS	35	54	0	115	\$2,069.27	\$17.99	\$38.32	2.13
36491	INSERTION OF CATHETER, VEIN	34	43	0	85	\$24,108.39	\$283.63	\$560.66	1.98
90292	HOSPITAL DISCHARGE DAY	32	36	2	37	\$2,682.50	\$72.50	\$74.51	1.03
36430	BLOOD TRANSFUSION SERVICE	30	112	0	275	\$19,776.73	\$71.92	\$176.58	2.46
96410	CHEMOTHERAPY, INFUSION METHOD	30	106	44	217	\$14,842.98	\$68.40	\$140.03	2.05
90610	EXTENDED CONSULTATION	29	38	6	38	\$3,485.85	\$91.73	\$91.73	1.00
62270	SPINAL FLUID TAP, DIAGNOSTIC	28	43	0	53	\$4,116.97	\$77.68	\$95.74	1.23
85102	BONE MARROW BIOPSY	28	35	0	40	\$3,454.24	\$86.36	\$98.69	1.14
93307	ECHO EXAM OF HEART	28	45	14	53	\$9,079.79	\$171.32	\$201.77	1.18
88104	MICROSCOPIC EXAM OF CELLS	27	47	0	57	\$1,346.07	\$23.62	\$28.64	1.21
38230	BONE MARROW COLLECTION	26	28	6	101	\$55,557.73	\$550.08	\$1,984.20	3.61
90605	INTERMEDIATE CONSULTATION	26	33	6	33	\$2,445.60	\$74.11	\$74.11	1.00
90640	BRIEF FOLLOW-UP CONSULT	26	66	13	112	\$3,061.26	\$27.33	\$46.38	1.70
88346	IMMUNOFLOUORESCENT STUDY	25	68	0	138	\$3,089.70	\$22.39	\$45.44	2.03
90642	INTERMEDIATE FOLLOWUP CONSULT	25	60	43	87	\$5,205.23	\$59.83	\$86.75	1.45
99160	CRITICAL CARE, EACH HOUR	25	49	2	70	\$16,342.21	\$233.46	\$333.51	1.43
76700	ECHO EXAM OF ABDOMEN	24	35	0	43	\$3,781.71	\$87.95	\$108.05	1.23
85100	BONE MARROW EXAMINATION	24	38	0	44	\$5,450.73	\$123.88	\$143.44	1.16
77470	SPECIAL RADIATION TREATMENT	23	37	0	144	\$18,527.57	\$128.66	\$500.75	3.89
90641	LIMITED FOLLOW-UP CONSULT	23	45	9	80	\$3,418.23	\$42.73	\$75.96	1.78
93320	DOPPLER ECHO EXAM, HEART	23	30	13	34	\$3,198.24	\$94.07	\$106.61	1.13
74000	X-RAY EXAM OF ABDOMEN	22	34	0	51	\$1,027.28	\$20.14	\$30.21	1.50
85103	BONE MARROW BIOPSY & EXAM	22	32	0	38	\$2,008.61	\$52.86	\$62.77	1.19
90030	OFFICE/OP VISIT, EST, MINIM	22	56	95	95	\$1,096.32	\$11.54	\$19.58	1.70
38240	BONE MARROW TRANSPLANTATION	21	25	0	24	\$12,045.59	\$501.90	\$481.82	0.96
38260	38260	21	23	0	31	\$30,144.23	\$972.39	\$1,310.62	1.35
77263	RADIATION THERAPY PLANNING	21	21	0	26	\$9,555.81	\$367.53	\$455.04	1.24
85097	BONE MARROW INTERPRETATION	21	41	0	44	\$2,707.66	\$61.54	\$66.04	1.07
90240	HOSPITAL VISIT, BRIEF	21	53	28	300	\$10,850.10	\$36.17	\$204.72	5.66

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
99173	CRITICAL CARE, FOLLOW-UP	21	74	0	268	\$28,659.57	\$106.94	\$387.29	3.62
70220	X-RAY EXAM OF SINUSES	20	27	0	27	\$864.26	\$32.01	\$32.01	1.00
74160	CONTRAST CAT SCAN OF ABDOMEN	20	32	0	33	\$6,877.15	\$208.40	\$214.91	1.03
11100	BIOPSY OF SKIN LESION	19	21	0	24	\$1,250.77	\$52.12	\$59.56	1.14
77321	RADIATION THERAPY PORT PLAN	19	20	0	31	\$3,188.69	\$102.86	\$159.43	1.55
86317	IMMUNOASSAY, INFECTIOUS AGENT	19	79	0	114	\$1,516.46	\$13.30	\$19.20	1.44
87250	VIRUS INOCULATION FOR TEST	18	74	0	132	\$4,188.65	\$31.73	\$56.60	1.78
90050	OFFICE/OP VISIT, EST, LTD	18	29	34	34	\$778.58	\$22.90	\$26.85	1.17
90215	HOSPITAL CARE, NEW, INTERMED	18	21	0	24	\$1,885.84	\$78.58	\$89.80	1.14
99232	SUBSEQUENT HOSPITAL CARE	18	58	5	226	\$15,720.00	\$69.56	\$271.03	3.90
85105	BONE MARROW, INTERPRETATION	17	22	0	28	\$1,734.34	\$61.94	\$78.83	1.27
88305	TISSUE EXAM BY PATHOLOGIST	17	28	0	44	\$2,774.72	\$63.06	\$99.10	1.57
99199	SPECIAL SERVICE OR REPORT	17	29	0	182	\$6,787.32	\$37.29	\$234.05	6.28
99233	SUBSEQUENT HOSPITAL CARE	17	100	29	428	\$45,622.76	\$106.60	\$456.23	4.28
70450	CAT SCAN OF HEAD OR BRAIN	16	24	0	32	\$5,906.08	\$184.57	\$246.09	1.33
77336	RADIATION PHYSICS CONSULT	16	18	0	19	\$1,700.35	\$89.49	\$94.46	1.06
90600	LIMITED CONSULTATION	16	21	14	40	\$1,692.32	\$42.31	\$80.59	1.90
77300	RADIATION THERAPY DOSE PLAN	15	15	0	19	\$1,605.36	\$84.49	\$107.02	1.27
90643	COMPLEX FOLLOW-UP CONSULT	15	46	29	56	\$5,272.88	\$94.16	\$114.63	1.22
90784	INJECTION (IV)	15	58	24	136	\$5,159.87	\$37.94	\$88.96	2.34
71250	CAT SCAN OF CHEST	14	16	0	17	\$2,471.36	\$145.37	\$154.46	1.06
77334	RADIATION TREATMENT AID(S)	14	15	0	21	\$3,284.69	\$156.41	\$218.98	1.40
80500	LAB PATHOLOGY CONSULTATION	14	46	0	99	\$4,269.85	\$43.13	\$92.82	2.15
90630	COMPLEX CONSULTATION	14	18	3	19	\$2,759.82	\$145.25	\$153.32	1.06
94010	BREATHING CAPACITY TEST	14	16	13	23	\$643.12	\$27.96	\$40.19	1.44
94720	MONOXIDE DIFFUSING CAPACITY	14	15	11	16	\$427.61	\$26.73	\$28.51	1.07
99231	SUBSEQUENT HOSPITAL CARE	14	112	11	250	\$13,285.95	\$53.14	\$118.62	2.23
36495	IMPLANT INFUSION PUMP	13	16	0	18	\$13,206.20	\$733.68	\$825.39	1.13
96412	CHEMOTHERAPY, INFUSION METHOD	13	52	52	146	\$7,319.96	\$50.14	\$140.77	2.81
99213	OFFICE/OUTPATIENT VISIT, EST	13	20	20	25	\$917.14	\$36.69	\$45.86	1.25
36489	INSERTION OF CATHETER, VEIN	12	15	0	15	\$3,566.91	\$237.79	\$237.79	1.00
85021	AUTOMATED HEMOGRAM	12	18	0	25	\$514.01	\$20.56	\$28.56	1.39
85060	BLOOD SMEAR INTERPRETATION	12	16	0	16	\$376.55	\$23.53	\$23.53	1.00
90070	OFFICE/OP VISIT, EST, EXTEND	12	13	20	20	\$974.98	\$48.75	\$75.00	1.54
90782	INJECTION (SC)/(IM)	12	21	59	64	\$3,799.87	\$59.37	\$180.95	3.05
99082	UNUSUAL PHYSICIAN TRAVEL	12	25	0	1,877	\$24,847.70	\$13.24	\$993.91	75.08
20220	BONE BIOPSY, TROCER/NEEDLE	11	17	0	21	\$2,524.92	\$120.23	\$148.52	1.24
36620	INSERTION CATHETER, ARTERY	11	14	0	15	\$2,461.64	\$164.11	\$175.83	1.07
71260	CONTRAST CAT SCAN OF CHEST	11	18	0	20	\$4,236.96	\$211.85	\$235.39	1.11
77430	WEEKLY RADIATION THERAPY	11	13	0	26	\$5,047.72	\$194.14	\$388.29	2.00
85022	AUTOMATED HEMOGRAM	11	19	0	28	\$324.34	\$11.58	\$17.07	1.47
86068	BLOOD COMPATIBILITY TEST	11	34	0	62	\$724.38	\$11.68	\$21.31	1.82
88312	SPECIAL STAINS	11	12	0	34	\$739.88	\$21.76	\$61.66	2.83
96450	CHEMOTHERAPY, INTO CNS	11	20	12	24	\$2,589.49	\$107.90	\$129.47	1.20

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----

(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	P.OF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
99174	CRITICAL CARE, FOLLOW-UP	11	93	0	378	\$53,992.92	\$142.84	\$580.57	4.06
31500	INSERT OF EMERGENCY AIRWAY	10	14	0	15	\$2,320.52	\$154.70	\$165.75	1.07
36490	INSERTION OF CATHETER, VEIN	10	11	0	56	\$6,920.56	\$123.58	\$629.14	5.09
38245		10	11	0	12	\$6,186.66	\$515.56	\$562.42	1.09
72193	CONTRAST CAT SCAN OF PELVIS	10	14	0	15	\$3,301.98	\$220.13	\$235.86	1.07
77290	SET RADIATION THERAPY FIELD	10	11	0	12	\$2,248.35	\$187.36	\$204.40	1.09
77331	SPECIAL RADIATION DOSIMETRY	10	11	0	16	\$1,020.81	\$63.80	\$92.80	1.45
81000	URINALYSIS WITH MICROSCOPY	10	11	0	11	\$94.24	\$8.57	\$8.57	1.00
85044	RETICULOCYTE COUNT	10	15	0	19	\$378.33	\$19.91	\$25.22	1.27
85595	ELECTRONIC PLATELET COUNT	10	26	0	58	\$504.55	\$8.70	\$19.41	2.23
90515	EMERGENCY CARE, NEW, INTERMED	10	11	27	29	\$1,544.70	\$53.27	\$140.43	2.64
94657	CONT. VENTILATOR MANAGEMENT	10	21	3	69	\$6,714.35	\$97.31	\$319.73	3.29
99262	FOLLOW-UP INPATIENT CONSULT	10	50	1	69	\$3,203.00	\$46.42	\$64.06	1.38
36415	DRAWING BLOOD	9	15	0	17	\$127.74	\$7.51	\$8.52	1.13
38999	BLOOD/LYMPH SYSTEM PROCEDURE	9	9	0	11	\$10,252.44	\$932.04	\$1,139.16	1.22
74150	CAT SCAN OF ABDOMEN	9	11	0	11	\$1,714.82	\$155.89	\$155.89	1.00
76000	FLUOROSCOPE EXAMINATION	9	10	0	12	\$380.72	\$31.73	\$38.07	1.20
77261	RADIATION THERAPY PLANNING	9	9	0	8	\$776.07	\$97.01	\$86.23	0.89
86999	IMMUNOLOGY PROCEDURE	9	23	0	75	\$6,720.19	\$89.60	\$292.18	3.26
87072	CULTURE OF SPECIMEN BY KIT	9	13	0	15	\$397.25	\$26.48	\$30.56	1.15
88262	CHROMOSOME COUNT:15-20 CELLS	9	13	0	15	\$3,292.77	\$219.52	\$253.29	1.15
90080	OFFICE/OP VISIT, EST, COMPRH	9	11	12	12	\$970.84	\$80.90	\$88.26	1.09
99223	INITIAL HOSPITAL CARE	9	9	1	10	\$1,444.19	\$144.42	\$160.47	1.11
31622	DIAGNOSTIC BRONCHOSCOPY	8	11	0	15	\$5,019.52	\$334.63	\$456.32	1.36
76770	ECHO EXAM ABDOMEN BACK WALL	8	10	0	13	\$1,433.82	\$110.29	\$143.38	1.30
80018	17-18 BLOOD/URINE TESTS	8	18	0	113	\$1,985.12	\$17.57	\$110.28	6.28
82947	ASSAY BODY FLUID, GLUCOSE	8	12	0	80	\$461.86	\$5.77	\$38.49	6.67
83735	ASSAY BLOOD MAGNESIUM	8	17	0	126	\$991.11	\$7.87	\$58.30	7.41
85023	AUTOMATED HEMOGRAM	8	20	0	135	\$1,034.66	\$7.66	\$51.73	6.75
85999	HEMATOLOGY PROCEDURE	8	11	0	21	\$2,783.00	\$132.52	\$253.00	1.91
90040	OFFICE/OP VISIT, EST, BRIEF	8	12	11	12	\$770.82	\$64.24	\$64.24	1.00
90780	IV INFUSION THERAPY, 1 HOUR	8	65	13	87	\$7,227.69	\$83.08	\$111.20	1.34
93000	ELECTROCARDIOGRAM, COMPLETE	8	17	10	24	\$508.49	\$21.19	\$29.91	1.41
93325	DOPPLER COLOR FLOW	8	14	5	20	\$933.19	\$46.66	\$66.66	1.43
99238	HOSPITAL DISCHARGE DAY	8	8	0	8	\$567.00	\$70.87	\$70.87	1.00
70470	CONTRAST CAT SCANS OF HEAD	7	8	0	9	\$2,025.65	\$225.07	\$253.21	1.13
70551	MAGNETIC IMAGE, BRAIN (MRI)	7	8	0	8	\$3,606.78	\$450.85	\$450.85	1.00
76705	ECHO EXAM OF ABDOMEN	7	13	0	20	\$1,001.89	\$50.09	\$77.07	1.54
77499	RADIATION THERAPY MANAGEMENT	7	8	0	18	\$3,893.15	\$216.29	\$486.64	2.25
78472	NUCLEAR SCAN, HEART MUSCLE	7	7	0	8	\$868.91	\$108.61	\$124.13	1.14
82565	ASSAY BLOOD CREATININE	7	8	0	63	\$281.91	\$4.47	\$35.24	7.88
85007	DIFFERENTIAL WBC COUNT	7	11	0	13	\$81.32	\$6.26	\$7.39	1.18
85610	PROTHROMBIN TIME	7	8	0	15	\$88.44	\$5.90	\$11.06	1.88
85730	THROMBOPLASTIN TIME, PARTIAL	7	8	0	14	\$93.49	\$6.68	\$11.69	1.75

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDBP)

HSCSIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
86813	HLA TYPING, A, B, AND/OR C	7	8	0	22	\$2,090.57	\$95.03	\$261.32	2.75
87040	BLOOD CULTURE FOR BACTERIA	7	16	0	77	\$992.70	\$12.89	\$62.04	4.81
88180	CELL MARKER STUDY	7	8	0	47	\$984.35	\$20.94	\$123.04	5.88
88321	MICROSLIDE CONSULTATION	7	9	0	17	\$925.50	\$54.44	\$102.83	1.89
88342	IMMUNOCYTOCHEMISTRY	7	7	0	23	\$760.11	\$33.05	\$108.59	3.29
90781	IV INFUSION, ADDITIONAL HOUR	7	46	11	83	\$9,960.05	\$120.00	\$216.52	1.80
93799	CARDIOVASCULAR PROCEDURE	7	9	4	12	\$960.02	\$80.00	\$106.67	1.33
94240	RESIDUAL LUNG CAPACITY	7	8	6	8	\$279.35	\$34.92	\$34.92	1.00
94656	INITIAL VENTILATOR MANAGEMENT	7	9	0	9	\$1,044.72	\$116.08	\$116.08	1.00
94799	PULMONARY SERVICE/PROCEDURE	7	9	12	13	\$1,119.95	\$86.15	\$124.44	1.44
96408	CHEMOTHERAPY, PUSH TECHNIQUE	7	15	6	18	\$741.38	\$41.19	\$49.43	1.20
99172	CRITICAL CARE, FOLLOW-UP	7	55	0	157	\$12,201.88	\$77.72	\$221.85	2.85
99254	INITIAL INPATIENT CONSULT	7	8	0	21	\$636.64	\$30.32	\$79.58	2.63
36000	PLACE NEEDLE IN VEIN	6	10	0	19	\$1,163.97	\$61.26	\$116.40	1.90
36299	VESSEL INJECTION PROCEDURE	6	9	0	12	\$2,599.00	\$216.58	\$288.78	1.33
36488	INSERTION OF CATHETER, VEIN	6	10	0	11	\$2,692.30	\$244.75	\$269.23	1.10
70355	PANORAMIC X-RAY OF JAWS	6	6	0	7	\$236.78	\$33.83	\$39.46	1.17
74010	X-RAY EXAM OF ABDOMEN	6	8	0	8	\$234.65	\$29.33	\$29.33	1.00
74020	X-RAY EXAM OF ABDOMEN	6	9	0	13	\$412.30	\$31.72	\$45.81	1.44
77280	SET RADIATION THERAPY FIELD	6	6	0	7	\$515.10	\$73.59	\$85.85	1.17
77315	RADIATION THERAPY DOSE PLAN	6	6	0	6	\$970.62	\$161.77	\$161.77	1.00
77410	DAILY RADIATION THERAPY	6	9	0	43	\$2,595.69	\$60.36	\$288.41	4.78
80019	19 OR MORE BLOOD/URINE TESTS	6	9	0	31	\$533.89	\$17.22	\$59.32	3.44
80031	DRUG MONITORING, ONE DRUG	6	9	0	16	\$811.93	\$50.75	\$90.21	1.78
82251	ASSAY BLOOD BILIRUBIN	6	8	0	22	\$361.55	\$16.43	\$45.19	2.75
82310	ASSAY CALCIUM IN BLOOD	6	13	0	27	\$179.00	\$6.63	\$13.77	2.08
84100	ASSAY BLOOD PHOSPHORUS	6	12	0	24	\$177.80	\$7.41	\$14.82	2.00
84450	UV-ASSAY TRANSAMINASE (SGOT)	6	9	0	27	\$490.23	\$18.16	\$54.47	3.00
85025	AUTOMATED HEMOGRAM	6	13	0	24	\$162.91	\$6.79	\$12.53	1.85
86805	LYMPHOCYTOTOXICITY ASSAY	6	7	0	18	\$1,568.07	\$87.12	\$224.01	2.57
86817	HLA TYPING, DR	6	10	0	16	\$4,918.00	\$307.38	\$491.80	1.60
88300	TISSUE EXAM BY PATHOLOGIST	6	6	0	6	\$72.56	\$12.09	\$12.09	1.00
88307	TISSUE EXAM BY PATHOLOGIST	6	8	0	10	\$1,235.51	\$123.55	\$154.44	1.25
88311	DECALCIFY TISSUE	6	8	0	9	\$230.35	\$25.59	\$28.79	1.13
90020	OFFICE/OP VISIT, NEW, COMPRH	6	6	6	6	\$501.85	\$83.64	\$83.64	1.00
90844	PSYCHOTHERAPY, 45-50 MIN	6	8	8	28	\$2,982.62	\$106.52	\$372.83	3.50
94700	BLOOD GAS ANALYSIS	6	15	4	18	\$1,239.88	\$68.88	\$82.66	1.20
96545	PROVIDE CHEMOTHERAPY AGENT	6	12	15	44	\$5,939.97	\$135.00	\$495.00	3.67
98902	CONFERENCE WITH PHYSICIAN	6	7	0	8	\$724.86	\$90.61	\$103.55	1.14
99252	INITIAL INPATIENT CONSULT	6	7	0	7	\$627.50	\$89.64	\$89.64	1.00
36410	DRAWING BLOOD	5	7	0	8	\$219.39	\$27.42	\$31.34	1.14
36497	REMOVE INFUSION PUMP	5	5	0	8	\$1,339.97	\$167.50	\$267.99	1.60
43235	UPPER GI ENDOSCOPY, DIAGNOSIS	5	5	0	5	\$1,701.60	\$340.32	\$340.32	1.00
70210	X-RAY EXAM OF SINUSES	5	7	0	7	\$159.67	\$22.81	\$22.81	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
70360	X-RAY EXAM OF NECK	5	5	0	5	\$94.49	\$18.90	\$18.90	1.00
70480	CAT SCAN OF SKULL	5	10	0	10	\$1,120.50	\$112.05	\$112.05	1.00
77370	RADIATION PHYSICS CONSULT	5	5	0	3	\$198.30	\$66.10	\$39.66	0.60
77415	PORT VERIFICATION FILMS	5	5	0	3	\$59.00	\$19.67	\$11.80	0.60
78306	NUCLEAR SCAN OF SKELETON	5	6	0	5	\$592.20	\$118.44	\$98.70	0.83
78471	NUCLEAR SCAN, HEART MUSCLE	5	6	0	7	\$1,292.83	\$184.69	\$215.47	1.17
80007	7 CLINICAL CHEMISTRY TESTS	5	15	0	35	\$1,106.52	\$31.61	\$73.77	2.33
84075	ASSAY ALKALINE PHOSPHATASE	5	5	0	5	\$246.18	\$49.24	\$49.24	1.00
86083	BLOOD TYPING;ANTIBODY SCREEN	5	19	0	26	\$372.89	\$14.34	\$19.63	1.37
86821	LYMPHOCYTE CULTURE, MIXED	5	5	0	5	\$2,171.34	\$434.27	\$434.27	1.00
88237	TISSUE CULTURE, BONE MARROW	5	6	0	8	\$1,733.61	\$216.70	\$288.93	1.33
90937	HEMODIALYSIS, REPEATED EVAL.	5	5	0	9	\$2,069.82	\$229.98	\$413.96	1.80
94060	EVALUATION OF WHEEZING	5	5	3	6	\$330.00	\$55.00	\$66.00	1.20
94200	LUNG FUNCTION TEST (MBC/MVV)	5	5	5	5	\$73.37	\$14.67	\$14.67	1.00
98900	CONFERENCE WITH PHYSICIAN	5	5	2	6	\$310.40	\$51.73	\$62.08	1.20
99000	SPECIMEN HANDLING	5	11	0	21	\$531.78	\$25.32	\$48.34	1.91
99054	MEDICAL SERVICES UNUSUAL HRS	5	16	0	22	\$920.18	\$41.83	\$57.51	1.38
99211	OFFICE/OUTPATIENT VISIT, EST	5	17	29	32	\$391.40	\$12.23	\$23.02	1.88
99244	OFFICE CONSULTATION	5	7	3	7	\$891.01	\$127.29	\$127.29	1.00
99255	INITIAL INPATIENT CONSULT	5	6	1	6	\$643.22	\$107.20	\$107.20	1.00
36010	PLACE CATHETER IN VEIN	4	5	0	5	\$684.94	\$136.99	\$136.99	1.00
37799	VASCULAR SURGERY PROCEDURE	4	4	0	7	\$924.60	\$132.09	\$231.15	1.75
38265	NEEDLE BIOPSY OF LIVER	4	4	0	4	\$5,477.75	\$1,369.44	\$1,369.44	1.00
47000	CONTRAST CAT SCAN OF HEAD	4	4	0	4	\$909.75	\$227.44	\$227.44	1.00
70460	CAT SCAN OF FACE, JAW	4	4	0	4	\$516.14	\$129.04	\$129.04	1.00
70486	CAT SCAN OF PELVIS	4	5	0	6	\$829.88	\$138.31	\$165.98	1.20
72192	CONTRAST CAT SCANS, ABDOMEN	4	4	0	4	\$597.50	\$149.38	\$149.38	1.00
76999	ECHO EXAMINATION PROCEDURE	4	5	0	7	\$1,464.09	\$209.16	\$292.82	1.40
77262	RADIATION THERAPY PLANNING	4	6	0	7	\$206.00	\$29.43	\$34.33	1.17
77285	SET RADIATION THERAPY FIELD	4	4	0	4	\$1,099.38	\$274.85	\$274.85	1.00
80004	4 CLINICAL CHEMISTRY TESTS	4	5	0	4	\$640.25	\$160.06	\$160.06	1.00
82040	ASSAY SERUM ALBUMIN	4	4	0	4	\$117.63	\$14.70	\$23.53	1.60
82150	ASSAY OF SERUM AMYLASE	4	4	0	4	\$166.70	\$41.68	\$41.68	1.00
84155	ASSAY SERUM PROTEIN	4	6	0	6	\$33.75	\$5.63	\$5.63	1.00
84460	UV-ASSAY TRANSAMINASE (SGPT)	4	4	0	5	\$45.94	\$9.19	\$11.49	1.25
84520	ASSAY BUN	4	7	0	34	\$213.00	\$6.26	\$30.43	4.86
84550	ASSAY BLOOD URIC ACID	4	5	0	61	\$337.38	\$5.53	\$67.48	12.20
85024	AUTOMATED HEMOGRAM	4	4	0	5	\$32.36	\$6.47	\$8.09	1.25
85027	AUTOMATED HEMOGRAM	4	4	0	6	\$62.61	\$10.44	\$15.65	1.50
86082	BLOOD TYPING, ABO & RHO(D)	4	8	0	16	\$62.27	\$3.89	\$7.78	2.00
86171	COMPLEMENT FIXATION, EACH	4	8	0	14	\$58.50	\$4.18	\$7.31	1.75
86287	HEPATITIS HAA, RIA, OR EIA	4	5	0	5	\$522.37	\$104.47	\$104.47	1.00
86289	HEPATITIS BC ANTIBODY TEST	4	6	0	7	\$243.23	\$34.75	\$40.54	1.17
		4	4	0	5	\$146.91	\$29.38	\$36.73	1.25

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
86329	IMMUNODIFFUSION, EACH	4	4	0	10	\$303.48	\$30.35	\$75.87	2.50
88299	CYTODIAGNOSTIC STUDY	4	4	0	5	\$1,355.80	\$271.16	\$338.95	1.25
89051	BODY FLUID CELL COUNT	4	4	0	9	\$95.88	\$10.65	\$13.70	1.29
90010	OFFICE/OP VISIT, NEW, LTD	4	4	4	4	\$115.95	\$28.99	\$28.99	1.00
90200	HOSPITAL CARE, NEW, BRIEF	4	4	1	4	\$256.95	\$64.24	\$64.24	1.00
90699	GENERAL MEDICAL SERVICE	4	4	5	7	\$203.38	\$29.05	\$50.85	1.75
90801	PSYCHIATRIC INTERVIEW	4	4	0	6	\$537.30	\$89.55	\$89.55	1.00
90830	PSYCHOLOGICAL TESTING	4	4	7	10	\$615.20	\$61.52	\$123.04	2.00
93503	INSERT/PLACE HEART CATHETER	4	4	0	4	\$1,009.01	\$252.25	\$252.25	1.00
96400	CHEMOTHERAPY, (SC)/(IM)	4	4	1	11	\$331.20	\$30.11	\$47.31	1.57
99050	POST-OP FOLLOW-UP VISIT	4	4	0	38	\$1,005.14	\$26.45	\$37.23	1.41
99214	OFFICE/OUTPATIENT VISIT, EST	4	4	7	8	\$399.10	\$49.89	\$79.82	1.60
30903	CONTROL OF NOSEBLEED	3	3	0	4	\$523.50	\$130.88	\$174.50	1.33
36600	WITHDRAWAL OF ARTERIAL BLOOD	3	3	0	2	\$31.76	\$15.88	\$10.59	0.67
38246	UPPER GI ENDOSCOPY, BIOPSY	3	3	0	3	\$2,275.00	\$758.33	\$758.33	1.00
43239	WEDGE BIOPSY OF LIVER	3	3	0	3	\$1,353.60	\$451.20	\$451.20	1.00
47100	X-RAY EXAM OF SKULL	3	3	0	9	\$6,963.40	\$773.71	\$1,392.68	1.80
70250	CONTRAST CAT SCAN, FACE/JAW	3	3	0	3	\$148.10	\$49.37	\$49.37	1.00
70487	CHEST X-RAY	3	3	0	3	\$562.50	\$187.50	\$187.50	1.00
71035	ECHO EXAM OF PELVIS	3	3	0	3	\$54.80	\$18.27	\$18.27	1.00
76856	RADIATION THERAPY DOSE PLAN	3	3	0	3	\$269.65	\$89.88	\$89.88	1.00
77305	RADIATION TREATMENT AID(S)	3	3	0	3	\$227.33	\$75.78	\$75.78	1.00
77333	EXTERNAL RADIATION DOSIMETRY	3	3	0	8	\$871.70	\$108.96	\$290.57	2.67
77399	RADIOLOGY PORT FILM(S)	3	3	0	7	\$839.00	\$279.67	\$279.67	1.00
77417	WEEKLY RADIATION THERAPY	3	3	0	3	\$181.80	\$25.97	\$36.36	1.40
77420	NUCLEAR SCAN OF KIDNEY	3	3	0	3	\$266.28	\$88.76	\$88.76	1.00
78704	ASSAY BLOOD BILIRUBIN	3	3	0	4	\$406.75	\$101.69	\$101.69	1.00
82250	CREATININE CLEARANCE TEST	3	3	0	9	\$61.65	\$6.85	\$12.33	1.80
84132	ASSAY BLOOD POTASSIUM	3	3	0	4	\$66.90	\$16.73	\$16.73	1.00
84231	RADIOIMMUNOASSAY	3	3	0	4	\$240.15	\$60.04	\$60.04	1.00
85018	HEMOGLOBIN, COLORIMETRIC	3	3	0	3	\$12.16	\$4.05	\$4.05	1.00
85376	FIBRINOGEN, THROMBIN	3	3	0	6	\$31.75	\$5.29	\$7.94	1.50
86080	BLOOD TYPING, ABO ONLY	3	3	0	3	\$17.50	\$5.83	\$5.83	1.00
86256	FLUORESCENT ANTIBODY; TITER	3	3	0	6	\$293.97	\$49.00	\$97.99	2.00
86312	HIV ANTIBODY DETECTION	3	3	0	3	\$77.88	\$25.96	\$25.96	1.00
86808	CYTOTOXIC ANTIBODY SCREENING	3	3	0	3	\$193.80	\$64.60	\$64.60	1.00
87070	CULTURE SPECIMEN, BACTERIA	3	3	0	18	\$187.75	\$10.43	\$37.55	3.60
87086	URINE CULTURE, COLONY COUNT	3	3	0	14	\$95.63	\$6.83	\$19.13	2.80
88106	MICROSCOPIC EXAM OF CELLS	3	3	0	6	\$105.98	\$17.66	\$21.20	1.20
88107	MICROSCOPIC EXAM OF CELLS	3	3	0	6	\$190.77	\$31.80	\$47.69	1.50
88160	CYTOPATHOLOGY	3	3	0	4	\$131.31	\$32.83	\$32.83	1.00
88182	CELL MARKER STUDY	3	3	0	5	\$519.42	\$103.88	\$173.14	1.67
88302	TISSUE EXAM BY PATHOLOGIST	3	3	0	4	\$150.93	\$37.73	\$37.73	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMI_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
88347	IMMUNOFLUORESCENT STUDY	3	8	0	12	\$1,124.90	\$93.74	\$140.61	1.50
88399	SURGICAL PATHOLOGY PROCEDURE	3	4	0	4	\$423.35	\$105.84	\$105.84	1.00
90017	OFFICE/OP VISIT, NEW, EXTEND	3	3	3	3	\$128.70	\$42.90	\$42.90	1.00
90530	EMERGENCY CARE, MINIMAL	3	4	7	7	\$547.50	\$78.21	\$136.88	1.75
90935	HEMODIALYSIS, ONE EVALUATION	3	9	0	23	\$6,208.10	\$269.92	\$689.79	2.56
93005	ELECTROCARDIOGRAM, TRACING	3	3	1	5	\$58.21	\$11.64	\$19.40	1.67
93308	ECHO EXAM OF HEART	3	14	3	16	\$890.00	\$55.63	\$63.57	1.14
94375	RESPIRATORY FLOW VOLUME LOOP	3	3	1	3	\$71.93	\$23.98	\$23.98	1.00
94760	MEASURE BLOOD OXYGEN LEVEL	3	4	1	6	\$128.70	\$21.45	\$32.18	1.50
95819	ELECTROENCEPHALOGRAM (EEG)	3	4	0	5	\$282.00	\$56.40	\$70.50	1.25
96414	CHEMOTHERAPY, INFUSION METHOD	3	4	1	11	\$6,375.05	\$579.55	\$1,593.76	2.75
96530	PUMP REFILLING, MAINTENANCE	3	5	8	8	\$415.07	\$51.88	\$83.01	1.60
96549	CHEMOTHERAPY, UNSPECIFIED	3	6	8	11	\$750.12	\$68.19	\$125.02	1.83
99150	PROLONGED MD ATTENDANCE	3	4	0	9	\$1,055.76	\$117.31	\$263.94	2.25
99171	CRITICAL CARE, FOLLOW-UP	3	17	0	38	\$2,026.96	\$53.34	\$119.23	2.24
99215	OFFICE/OUTPATIENT VISIT, EST	3	4	5	5	\$493.10	\$98.62	\$123.28	1.25
99243	OFFICE CONSULTATION	3	3	3	3	\$119.21	\$39.74	\$39.74	1.00
99253	INITIAL INPATIENT CONSULT	3	4	0	5	\$528.70	\$105.74	\$132.18	1.25
99261	FOLLOW-UP INPATIENT CONSULT	3	4	1	5	\$128.00	\$25.60	\$32.00	1.25
99263	FOLLOW-UP INPATIENT CONSULT	3	27	1	34	\$2,996.01	\$88.12	\$110.96	1.26
10120	REMOVE FOREIGN BODY	2	2	0	2	\$116.25	\$58.13	\$58.13	1.00
31020	EXPLORATION MAXILLARY SINUS	2	2	0	2	\$645.84	\$322.92	\$322.92	1.00
31250	NASAL ENDOSCOPY, DIAGNOSTIC	2	2	0	2	\$303.73	\$151.87	\$151.87	1.00
32000	DRAINAGE OF CHEST	2	2	0	2	\$894.30	\$447.15	\$447.15	1.00
32095	BIOPSY THROUGH CHEST WALL	2	2	0	2	\$2,142.05	\$1,071.03	\$1,071.03	1.00
32100	EXPLORATION/BIOPSY OF CHEST	2	2	0	3	\$3,109.05	\$1,036.35	\$1,554.53	1.50
36260	INSERTION OF INFUSION PUMP	2	2	0	2	\$852.13	\$426.07	\$426.07	1.00
38241	REMOVAL OF SPLEEN, TOTAL	2	2	0	11	\$4,628.00	\$420.73	\$2,314.00	5.50
38100	BONE MARROW TRANSPLANTATION	2	4	0	4	\$1,210.00	\$302.50	\$302.50	1.00
49000	EXPLORATION OF ABDOMEN	2	2	0	26	\$2,111.50	\$81.21	\$1,055.75	13.00
70100	X-RAY EXAM OF JAW	2	2	0	2	\$59.25	\$29.63	\$29.63	1.00
70481	CONTRAST CAT SCAN OF SKULL	2	3	0	3	\$455.10	\$151.70	\$151.70	1.00
71101	X-RAY EXAM OF RIBS, CHEST	2	2	0	2	\$56.34	\$28.17	\$28.17	1.00
73020	X-RAY EXAM OF SHOULDER	2	2	0	3	\$46.02	\$15.34	\$23.01	1.50
73060	X-RAY EXAM OF HUMERUS	2	2	0	2	\$40.70	\$20.35	\$20.35	1.00
73550	X-RAY EXAM OF THIGH	2	2	0	3	\$56.05	\$18.68	\$28.03	1.50
74022	X-RAY EXAM SERIES, ABDOMEN	2	2	0	3	\$103.60	\$34.53	\$51.80	1.50
74340	X-RAY GUIDE FOR GI TUBE	2	2	0	2	\$113.50	\$56.75	\$56.75	1.00
76001	FLUOROSCOPE EXAM, EXTENSIVE	2	2	0	2	\$180.60	\$90.30	\$90.30	1.00
76020	X-RAYS FOR BONE AGE	2	2	0	2	\$49.00	\$24.50	\$24.50	1.00
77299	RADIATION THERAPY PLANNING	2	2	0	2	\$374.00	\$187.00	\$187.00	1.00
77310	RADIATION THERAPY DOSE PLAN	2	2	0	2	\$173.10	\$86.55	\$86.55	1.00
77332	RADIATION TREATMENT AID(S)	2	2	0	2	\$104.00	\$52.00	\$52.00	1.00
77425	WEEKLY RADIATION THERAPY	2	2	0	2	\$393.60	\$196.80	\$196.80	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
77431	RADIATION THERAPY MANAGEMENT	2	2	0	2	\$165.48	\$82.74	\$82.74	1.00
78215	NUCLEAR SCAN, LIVER & SPLEEN	2	2	0	2	\$141.71	\$70.86	\$70.86	1.00
78223	NUCLEAR SCAN, BILIARY TRACT	2	2	0	2	\$102.80	\$51.40	\$51.40	1.00
78435	NUCLEAR SCAN OF HEART FLOW	2	2	0	2	\$157.00	\$78.50	\$78.50	1.00
78700	NUCLEAR SCAN OF KIDNEY	2	2	0	2	\$186.75	\$93.38	\$93.38	1.00
78725	NUCLEAR EXAM OF KIDNEY	2	2	0	3	\$137.90	\$45.97	\$68.95	1.50
80005	5 CLINICAL CHEMISTRY TESTS	2	4	0	57	\$902.74	\$15.84	\$225.69	14.25
80012	12 CLINICAL CHEMISTRY TESTS	2	2	0	2	\$23.24	\$11.62	\$11.62	1.00
80059	HEPATITIS PANEL	2	3	0	5	\$239.25	\$47.85	\$79.75	1.67
82435	ASSAY BLOOD CHLORIDES	2	2	0	3	\$84.62	\$28.21	\$42.31	1.50
82465	ASSAY SERUM CHOLESTEROL	2	4	0	7	\$30.25	\$4.32	\$7.56	1.75
82977	ASSAY OF GGT ENZYME	2	5	0	22	\$170.00	\$7.73	\$34.00	4.40
83011	ELP ASSAY HAPTOGLOBIN	2	2	0	2	\$68.00	\$34.00	\$34.00	1.00
83615	UV-ASSAY BLOOD LDH ENZYME	2	2	0	2	\$16.25	\$8.13	\$8.13	1.00
84045	ASSAY PHENYTOIN	2	2	0	2	\$50.56	\$25.28	\$25.28	1.00
84195	ASSAY SPINAL FLUID PROTEIN	2	2	0	2	\$43.34	\$21.67	\$21.67	1.00
84695	ASSAY GENTAMICIN	2	2	0	6	\$62.75	\$10.46	\$31.38	3.00
85009	DIFFERENTIAL WBC COUNT	2	2	0	2	\$21.50	\$10.75	\$10.75	1.00
85014	HEMATOCRIT	2	2	0	2	\$13.63	\$6.82	\$6.82	1.00
85048	WHITE BLOOD CELL (WBC) COUNT	2	2	0	2	\$13.50	\$6.75	\$6.75	1.00
85535	IRON STAIN, BLOOD CELLS	2	2	0	3	\$36.42	\$12.14	\$18.21	1.50
86006	ANTIBODY, QUALITATIVE, FIRST	2	3	0	4	\$117.86	\$29.46	\$39.29	1.33
86008	ANTIBODY, QUANT., FIRST	2	2	0	2	\$37.48	\$18.74	\$18.74	1.00
86016	RBC ANTIBODY SCREEN	2	6	0	9	\$34.50	\$3.83	\$5.75	1.50
86032	ANTIHUMAN GLOBULIN TEST	2	3	0	4	\$13.13	\$3.28	\$4.38	1.33
86077	PHYSICIAN BLOOD BANK SERVICE	2	7	0	19	\$486.00	\$25.58	\$69.43	2.71
86078	PHYSICIAN BLOOD BANK SERVICE	2	2	0	2	\$144.00	\$72.00	\$72.00	1.00
86128	COLLECT, STORAGE PT OWN BLOOD	2	2	0	2	\$91.00	\$45.50	\$45.50	1.00
86255	FLUORESCENT ANTIBODY; SCREEN	2	2	0	3	\$95.64	\$31.88	\$47.82	1.50
86291	HEPATITIS BS ANTIBODY TEST	2	2	0	2	\$54.25	\$27.13	\$27.13	1.00
86296	HEPATITIS A ANTIBODY TEST	2	2	0	2	\$74.37	\$37.19	\$37.19	1.00
86299	HEPATITIS A ANTIBODY TEST	2	3	0	3	\$109.68	\$36.56	\$36.56	1.00
86357	LYMPHOCYTES, T&B DISTINCTION	2	4	0	5	\$537.50	\$107.50	\$134.38	1.25
86430	RHEUMATOID FACTOR TEST	2	2	0	2	\$63.23	\$31.62	\$31.62	1.00
87163	SPECIAL MICROBIOLOGY CULTURE	2	3	0	4	\$23.80	\$5.95	\$7.93	1.33
87205	SMEAR, STAIN & INTERPRET	2	5	0	39	\$228.42	\$5.86	\$45.68	7.80
88108	MICROSCOPIC EXAM OF CELLS	2	3	0	6	\$223.80	\$37.30	\$74.60	2.00
88151	CYTOPATHOLOGY INTERPRETATION	2	2	0	2	\$16.63	\$8.32	\$8.32	1.00
88172	EVALUATION OF SMEAR	2	2	0	2	\$73.28	\$36.64	\$36.64	1.00
88173	INTERPRETATION OF SMEAR	2	2	0	2	\$113.00	\$56.50	\$56.50	1.00
88261	CHROMOSOME ANALYSIS: 5 CELLS	2	2	0	2	\$362.50	\$181.25	\$181.25	1.00
89399	PATHOLOGY LAB PROCEDURE	2	3	0	3	\$572.74	\$190.91	\$190.91	1.00
90150	HOME VISIT, LIMITED	2	2	4	4	\$292.57	\$73.14	\$146.29	2.00
90560	EMERGENCY CARE, INTERMEDIATE	2	2	2	2	\$403.60	\$201.80	\$201.80	1.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDB)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
90650	2ND OR 3RD OPINION	2	2	0	4	\$86.00	\$21.50	\$43.00	2.00
90843	PSYCHOTHERAPY, 20-30 MIN	2	3	0	5	\$352.00	\$70.40	\$117.33	1.67
92557	COMPREHENSIVE HEARING TEST	2	2	1	2	\$105.50	\$52.75	\$52.75	1.00
93040	RHYTHM ECG WITH REPORT	2	2	1	2	\$298.28	\$149.14	\$149.14	1.00
93321	DOPPLER ECHO EXAM, HEART	2	5	3	5	\$222.00	\$44.40	\$44.40	1.00
94660	POS AIRWAY PRESSURE, CPAP	2	3	0	5	\$329.00	\$65.80	\$109.67	1.67
94762	MEASURE BLOOD OXYGEN LEVEL	2	13	0	15	\$644.12	\$42.94	\$69.55	1.15
97799	PHYSICAL MEDICINE PROCEDURE	2	2	10	10	\$760.94	\$76.09	\$380.47	5.00
99162	CRITICAL CARE, ADDED 30 MIN	2	3	0	4	\$338.60	\$84.65	\$112.87	1.33
99241	OFFICE CONSULTATION	2	3	2	3	\$64.76	\$21.59	\$21.59	1.00
99242	OFFICE CONSULTATION	2	2	2	2	\$73.92	\$36.96	\$36.96	1.00
99291	CRITICAL CARE, FIRST HOUR	2	4	0	6	\$1,059.65	\$176.61	\$264.91	1.50
11000	SURGICAL CLEANSING OF SKIN	1	1	0	1	\$38.25	\$38.25	\$38.25	1.00
11101	BIOPSY, EACH ADDED LESION	1	1	0	1	\$7.62	\$7.62	\$7.62	1.00
11602	REMOVAL OF SKIN LESION	1	1	0	1	\$188.50	\$188.50	\$188.50	1.00
20550	INJECT TENDON/LIGAMENT/CYST	1	1	0	1	\$27.23	\$27.23	\$27.23	1.00
20600	DRAIN/INJECT JOINT/BURSA	1	1	0	1	\$27.08	\$27.08	\$27.08	1.00
20605	DRAIN/INJECT JOINT/BURSA	1	1	0	1	\$52.50	\$52.50	\$52.50	1.00
28110	PART REMOVAL OF METATARSAL	1	1	0	1	\$265.12	\$265.12	\$265.12	1.00
30901	CONTROL OF NOSEBLEED	1	1	0	2	\$82.50	\$41.25	\$82.50	2.00
31030	EXPLORATION MAXILLARY SINUS	1	1	0	1	\$522.50	\$522.50	\$522.50	1.00
31205	REMOVAL OF ETHMOID SINUS	1	2	0	3	\$2,638.40	\$879.47	\$1,319.20	1.50
31505	DIAGNOSTIC LARYNGOSCOPY	1	1	0	1	\$40.00	\$40.00	\$40.00	1.00
31525	BRONCHOSCOPY WITH BIOPSY	1	1	0	1	\$478.40	\$478.40	\$478.40	1.00
31625	BRONCHOSCOPY, CLEAR AIRWAYS	1	1	0	1	\$158.83	\$158.83	\$158.83	1.00
31645	BRONCHOSCOPY, CLEAR AIRWAYS	1	1	0	1	\$440.00	\$440.00	\$440.00	1.00
31659	BRONCHOSCOPY PROCEDURES	1	2	0	2	\$1,196.00	\$598.00	\$598.00	1.00
32405	BIOPSY, LUNG OR MEDIASTINUM	1	1	0	1	\$540.00	\$540.00	\$540.00	1.00
33010	DRAINAGE OF HEART SAC	1	1	0	1	\$90.23	\$90.23	\$90.23	1.00
33025	INCISION OF HEART SAC	1	2	0	4	\$4,596.60	\$1,149.15	\$2,298.30	2.00
36140	PLACE CATHETER IN ARTERY	1	1	0	1	\$80.80	\$80.80	\$80.80	1.00
36400	DRAWING BLOOD	1	1	0	1	\$34.00	\$34.00	\$34.00	1.00
36420	DRAWING BLOOD	1	1	0	2	\$160.00	\$80.00	\$160.00	2.00
36520	PLASMA AND/OR CELL EXCHANGE	1	1	0	3	\$600.00	\$200.00	\$600.00	3.00
36530	INSERTION OF INFUSION PUMP	1	1	0	7	\$183.33	\$26.19	\$183.33	7.00
36533	INSERTION OF ACCESS PORT	1	1	0	1	\$760.00	\$760.00	\$760.00	1.00
36800	INSERTION OF CANNULA	1	1	0	1	\$187.50	\$187.50	\$187.50	1.00
36820	INSERTION OF CANNULA	1	1	0	1	\$709.08	\$709.08	\$709.08	1.00
38250	BIOPSY/REMOVAL, LYMPH NODE(S)	1	1	0	2	\$1,604.05	\$802.03	\$1,604.05	2.00
38500	BIOPSY/REMOVAL, LYMPH NODE(S)	1	1	0	1	\$164.65	\$164.65	\$164.65	1.00
38510	BIOPSY/REMOVAL, LYMPH NODE(S)	1	1	0	1	\$243.00	\$243.00	\$243.00	1.00
43260	ENDOSCOPY, BILE DUCT/PANCREAS	1	1	0	2	\$975.40	\$487.70	\$975.40	2.00
43830	PLACE GASTROSTOMY TUBE	1	1	0	2	\$1,460.00	\$730.00	\$1,460.00	2.00
44111	EXCISION OF BOWEL LESION(S)	1	1	0	1	\$1,215.20	\$1,215.20	\$1,215.20	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
44143	PARTIAL REMOVAL OF COLON	1	1	0	1	\$419.76	\$419.76	\$419.76	1.00
44955	APPENDECTOMY	1	1	0	1	\$250.00	\$250.00	\$250.00	1.00
45100	BIOPSY OF RECTUM	1	1	0	1	\$180.00	\$180.00	\$180.00	1.00
45331	SIGMOIDOSCOPY AND BIOPSY	1	1	0	1	\$223.00	\$223.00	\$223.00	1.00
45378	DIAGNOSTIC COLONOSCOPY	1	1	0	1	\$450.00	\$450.00	\$450.00	1.00
49080	PUNCTURE, PERITONEAL CAVITY	1	1	0	1	\$85.00	\$85.00	\$85.00	1.00
49180	BIOPSY, ABDOMINAL MASS	1	1	0	6	\$525.00	\$87.50	\$525.00	6.00
49420	INSERT ABDOMINAL DRAIN	1	1	0	1	\$379.80	\$379.80	\$379.80	1.00
49421	INSERT ABDOMINAL DRAIN	1	1	0	1	\$750.00	\$750.00	\$750.00	1.00
51005	DRAINAGE OF BLADDER	1	1	0	1	\$32.84	\$32.84	\$32.84	1.00
52005	CYSTOSCOPY & URETER CATHETER	1	1	0	1	\$309.08	\$309.08	\$309.08	1.00
52235	CYSTOSCOPY AND TREATMENT	1	1	0	1	\$330.00	\$330.00	\$330.00	1.00
53600	DILATE URETHRA STRICTURE	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
53675	INSERT URINARY CATHETER	1	1	0	-1	\$0.00	\$0.00	\$0.00	-1.00
56600	BIOPSY OF VULVA	1	1	0	-1	\$0.00	\$0.00	\$0.00	-1.00
57250	REPAIR RECTUM & VAGINA	1	1	0	1	\$218.40	\$218.40	\$218.40	1.00
61140	PIERCE SKULL FOR BIOPSY	1	1	0	1	\$15.00	\$15.00	\$15.00	1.00
61154	PIERCE SKULL, REMOVE CLOT	1	1	0	2	\$2,732.40	\$1,366.20	\$2,732.40	2.00
62288	INJECTION INTO SPINAL CANAL	1	2	0	2	\$3,534.00	\$1,767.00	\$1,767.00	1.00
69200	CLEAR OUTER EAR CANAL	1	1	0	2	\$210.00	\$105.00	\$210.00	2.00
69421	INCISION OF EARDRUM	1	1	0	1	\$50.60	\$50.60	\$50.60	1.00
69436	CREATE EARDRUM OPENING	1	1	0	1	\$293.30	\$293.30	\$293.30	1.00
70260	X-RAY EXAM OF SKULL	1	1	0	2	\$525.40	\$262.70	\$525.40	2.00
70310	X-RAY EXAM OF TEETH	1	1	0	1	\$34.30	\$34.30	\$34.30	1.00
70320	FULL MOUTH X-RAY OF TEETH	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00
70492	CONTRAST CAT OF NECK TISSUE	1	1	0	1	\$28.50	\$28.50	\$28.50	1.00
70552	MAGNETIC IMAGE, BRAIN (MRI)	1	1	0	1	\$153.10	\$153.10	\$153.10	1.00
71015	CHEST X-RAY	1	1	0	1	\$1,184.16	\$1,184.16	\$1,184.16	1.00
71030	CHEST X-RAY	1	3	0	4	\$88.80	\$22.20	\$29.60	1.33
71037	X-RAY GUIDANCE FOR BIOPSY	1	1	0	1	\$25.60	\$25.60	\$25.60	1.00
71270	CONTRAST CAT SCANS OF CHEST	1	1	0	1	\$72.00	\$72.00	\$72.00	1.00
72141	MAGNETIC IMAGE, NECK SPINE	1	1	0	1	\$223.20	\$223.20	\$223.20	1.00
72170	X-RAY EXAM OF PELVIS	1	1	0	1	\$249.25	\$249.25	\$249.25	1.00
72190	X-RAY EXAM OF PELVIS	1	1	0	1	\$15.75	\$15.75	\$15.75	1.00
73030	X-RAY EXAM OF SHOULDER	1	2	0	2	\$58.16	\$29.08	\$29.08	1.00
73070	X-RAY EXAM OF ELBOW	1	1	0	1	\$23.20	\$23.20	\$23.20	1.00
73510	X-RAY EXAM OF HIP	1	1	0	1	\$31.06	\$31.06	\$31.06	1.00
73520	X-RAY EXAM OF KNEE	1	1	0	1	\$21.00	\$21.00	\$21.00	1.00
73560	X-RAY EXAM OF KNEE	1	1	0	1	\$31.80	\$31.80	\$31.80	1.00
73590	X-RAY EXAM OF LOWER LEG	1	1	0	1	\$27.30	\$27.30	\$27.30	1.00
73630	X-RAY EXAM OF FOOT	1	1	0	1	\$19.00	\$19.00	\$19.00	1.00
73700	CAT SCAN OF LEG	1	1	0	1	\$37.50	\$37.50	\$37.50	1.00
74181	MAGNETIC IMAGE, ABDOMEN(MRI)	1	1	0	1	\$116.00	\$116.00	\$116.00	1.00
74220	CONTRAST XRAY EXAM, ESOPHAGUS	1	1	0	1	\$234.00	\$234.00	\$234.00	1.00
		1	1	0	1	\$37.88	\$37.88	\$37.88	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
74240	X-RAY EXAM UPPER GI TRACT	1	1	0	1	\$55.25	\$55.25	\$55.25	1.00
74400	CONTRAST X-RAY URINARY TRACT	1	1	0	1	\$37.88	\$37.88	\$37.88	1.00
74410	CONTRAST X-RAY URINARY TRACT	1	1	0	1	\$52.00	\$52.00	\$52.00	1.00
74420	CONTRAST X-RAY URINARY TRACT	1	1	0	1	\$26.25	\$26.25	\$26.25	1.00
74456	X-RAY EXAM URETHRA/BLADDER	1	1	0	1	\$80.00	\$80.00	\$80.00	1.00
75821	VEIN X-RAY, ARM/LEG	1	1	0	1	\$89.00	\$89.00	\$89.00	1.00
75827	VEIN X-RAY, CHEST	1	1	0	2	\$360.00	\$180.00	\$360.00	2.00
75889	VEIN X-RAY, LIVER	1	1	0	1	\$132.48	\$132.48	\$132.48	1.00
75985	XRAY CONTROL CATHETER CHANGE	1	1	0	1	\$202.69	\$202.69	\$202.69	1.00
76003	NEEDLE LOCALIZATION BY X-RAY	1	1	0	1	\$49.40	\$49.40	\$49.40	1.00
76061	X-RAYS, BONE SURVEY	1	1	0	1	\$51.50	\$51.50	\$51.50	1.00
76062	X-RAYS, BONE SURVEY	1	1	0	1	\$69.00	\$69.00	\$69.00	1.00
76100	X-RAY EXAM OF BODY SECTION	1	1	0	1	\$1,990.50	\$1,990.50	\$1,990.50	1.00
76140	X-RAY CONSULTATION	1	1	0	1	\$50.00	\$50.00	\$50.00	1.00
76370	CAT SCAN FOR THERAPY GUIDE	1	1	0	1	\$6.17	\$6.17	\$6.17	1.00
76375	CAT SCANS, OTHER PLANES	1	1	0	1	\$362.40	\$362.40	\$362.40	1.00
76536	ECHO EXAM OF HEAD AND NECK	1	1	0	1	\$40.50	\$40.50	\$40.50	1.00
76604	ECHO EXAM OF CHEST	1	1	0	1	\$55.60	\$55.60	\$55.60	1.00
76855	ECHO EXAM OF PELVIS	1	1	0	1	\$220.81	\$220.81	\$220.81	1.00
76857	ECHO EXAM OF PELVIS	1	1	0	1	\$49.00	\$49.00	\$49.00	1.00
76880	ECHO EXAM OF EXTREMITY	1	1	0	1	\$69.30	\$69.30	\$69.30	1.00
76925	ECHO EXAM OF BLOOD FLOW	1	1	0	1	\$101.10	\$101.10	\$101.10	1.00
76943	ECHO GUIDE FOR BIOPSY	1	1	0	1	\$310.00	\$310.00	\$310.00	1.00
76986	ECHO EXAM AT SURGERY	1	1	0	2	\$82.60	\$41.30	\$82.60	2.00
77400	DAILY RADIATION THERAPY	1	1	0	3	\$202.50	\$67.50	\$202.50	3.00
77401	RADIATION TREATMENT DELIVERY	1	2	0	4	\$451.20	\$112.80	\$225.60	2.00
77405	DAILY RADIATION THERAPY	1	2	0	10	\$541.50	\$54.15	\$270.75	5.00
77413	RADIATION TREATMENT DELIVERY	1	3	0	4	\$363.00	\$90.75	\$121.00	1.33
77414	RADIATION TREATMENT DELIVERY	1	1	0	5	\$463.00	\$92.60	\$463.00	5.00
78220	NUCLEAR SCAN, LIVER FUNCTION	1	1	0	1	\$83.10	\$83.10	\$83.10	1.00
78280	G.I. BLOOD LOSS EXAM	1	1	0	1	\$37.00	\$37.00	\$37.00	1.00
78315	NUCLEAR SCAN OF BONE	1	1	0	1	\$148.40	\$148.40	\$148.40	1.00
78415	NUCLEAR SCAN OF HEART BLOOD	1	1	0	1	\$118.80	\$118.80	\$118.80	1.00
78460	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$89.00	\$89.00	\$89.00	1.00
78585	NUCLEAR SCAN OF LUNG	1	1	0	1	\$80.00	\$80.00	\$80.00	1.00
78707	NUCLEAR SCAN OF KIDNEY	1	2	0	2	\$276.00	\$138.00	\$138.00	1.00
78715	NUCLEAR EXAM OF KIDNEY	1	1	0	1	\$39.25	\$39.25	\$39.25	1.00
78800	NUCLEAR EXAM OF LESTON	1	1	0	1	\$77.25	\$77.25	\$77.25	1.00
78802	NUCLEAR EXAM OF LESIONS	1	1	0	1	\$137.60	\$137.60	\$137.60	1.00
78805	NUCLEAR EXAM OF ABSCESS	1	1	0	1	\$79.80	\$79.80	\$79.80	1.00
78806	NUCLEAR EXAM OF ABSCESS	1	1	0	1	\$110.00	\$110.00	\$110.00	1.00
78890	AUTOMATED DATA, NUCLEAR MED	1	1	0	1	\$30.00	\$30.00	\$30.00	1.00
78891	AUTOMATED DATA, NUCLEAR MED	1	1	0	2	\$132.80	\$66.40	\$132.80	2.00
78990	PROVIDE RADIOISOTOPE(S)	1	1	0	1	\$150.00	\$150.00	\$150.00	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
78999	NUCLEAR DIAGNOSTIC EXAM	1	1	0	2	\$869.60	\$434.80	\$869.60	2.00
80006	6 CLINICAL CHEMISTRY TESTS	1	2	0	8	\$50.00	\$6.25	\$25.00	4.00
80010	10 CLINICAL CHEMISTRY TESTS	1	1	0	1	\$87.00	\$87.00	\$87.00	1.00
80016	13-16 BLOOD/URINE TESTS	1	6	0	21	\$690.00	\$32.86	\$115.00	3.50
80042	ASSAY BLOOD, ANTIMICROBIAL	1	1	0	1	\$7.00	\$7.00	\$7.00	1.00
80073	RENAL PANEL	1	1	0	1	\$26.11	\$26.11	\$26.11	1.00
80090	ANTIBODY PANEL	1	1	0	1	\$12.26	\$12.26	\$12.26	1.00
80502	LAB PATHOLOGY CONSULTATION	1	5	0	7	\$219.10	\$31.30	\$43.82	1.40
82140	ASSAY OF BLOOD AMMONIA	1	1	0	3	\$10.50	\$3.50	\$10.50	3.00
82372	ASSAY SERUM CARBAMAZEPINE	1	1	0	2	\$21.60	\$10.80	\$21.60	2.00
82374	ASSAY BLOOD CARBON DIOXIDE	1	1	0	1	\$7.51	\$7.51	\$7.51	1.00
82607	RIA ASSAY FOR VITAMIN B-12	1	1	0	1	\$52.00	\$52.00	\$52.00	1.00
82643	RIA ASSAY FOR DIGOXIN	1	2	0	4	\$36.00	\$9.00	\$18.00	2.00
82664	ELECTROPHORETIC TEST	1	1	0	1	\$34.00	\$34.00	\$34.00	1.00
82728	ASSAY FERRITIN	1	1	0	1	\$61.00	\$61.00	\$61.00	1.00
82746	BLOOD FOLIC ACID RIA	1	1	0	1	\$52.00	\$52.00	\$52.00	1.00
82785	ASSAY, GAMMAGLOBULIN E	1	1	0	1	\$34.66	\$34.66	\$34.66	1.00
82943	RIA ASSAY OF GLUCAGON	1	1	0	2	\$24.22	\$12.11	\$24.22	2.00
83010	CHEM ASSAY HAPTOGLOBIN	1	1	0	1	\$42.00	\$42.00	\$42.00	1.00
83540	ASSAY SERUM IRON	1	1	0	1	\$40.00	\$40.00	\$40.00	1.00
83550	SERUM IRON BINDING TEST	1	1	0	1	\$40.00	\$40.00	\$40.00	1.00
83720	BLOOD LIPOPROTEIN ASSAY	1	1	0	1	\$28.50	\$28.50	\$28.50	1.00
83750	ASSAY BLOOD MAGNESIUM	1	2	0	5	\$100.00	\$20.00	\$50.00	2.50
83895	ASSAY URINE FOR NITROGEN	1	1	0	1	\$40.00	\$40.00	\$40.00	1.00
83912	GENETIC EXAMINATION	1	1	0	1	\$96.36	\$96.36	\$96.36	1.00
83915	ASSAY NUCLEOTIDASE	1	1	0	1	\$30.80	\$30.80	\$30.80	1.00
84170	ASSAY SERUM A/G RATIO	1	3	0	5	\$12.50	\$2.50	\$4.17	1.67
84175	ASSAY BODY PROTEINS	1	2	0	2	\$26.00	\$13.00	\$13.00	1.00
84300	ASSAY URINE SODIUM	1	2	0	2	\$5.00	\$2.50	\$2.50	1.00
84339	RIA ASSAY, FREE THYROXINE	1	1	0	1	\$18.64	\$18.64	\$18.64	1.00
84443	ASSAY THYROID STIM HORMONE	1	1	0	1	\$31.25	\$31.25	\$31.25	1.00
84455	ASSAY TRANSAMINASE (SGOT)	1	1	0	1	\$13.31	\$13.31	\$13.31	1.00
84465	ASSAY TRANSAMINASE (SGPT)	1	1	0	1	\$13.31	\$13.31	\$13.31	1.00
84478	ASSAY BLOOD TRIGLYCERIDES	1	4	0	5	\$16.00	\$3.20	\$4.00	1.25
84479	ASSAY TRIIODOTHYRONINE (T-3)	1	1	0	1	\$3.00	\$3.00	\$3.00	1.00
84630	ASSAY BLOOD ZINC	1	3	0	6	\$7.00	\$9.50	\$19.00	2.00
84810	ASSAY TOBRAMYCIN	1	1	0	1	\$13.10	\$13.10	\$13.10	1.00
85029	AUTOMATED HEMOGRAM	1	2	0	3	\$5.00	\$5.00	\$7.50	1.50
85030	AUTOMATED HEMOGRAM	1	1	0	1	\$1.28	\$1.28	\$1.28	1.00
85041	RED BLOOD CELL (RBC) COUNT	1	1	0	2	\$15.01	\$7.51	\$15.01	2.00
85250	BLOOD CLOT FACTOR IX TEST	1	1	0	3	\$52.00	\$17.33	\$52.00	3.00
85560	WBC PEROXIDASE STAIN	1	1	0	1	\$18.40	\$18.40	\$18.40	1.00
85575	BLOOD PLATELET ADHESIVENESS	1	1	0	1	\$10.35	\$10.35	\$10.35	1.00
85580	BLOOD PLATELET COUNT	1	1	0	1	\$14.00	\$14.00	\$14.00	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRMNT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY GOVT PAY PER SERV	SVC TO RATIO
85590	PLATELET PHASE MICROSCOPY	1	1	0	1	\$2.54	\$2.54	\$2.54	1.00
85651	RBC SEDIMENTATION RATE	1	1	0	1	\$1.93	\$1.93	\$1.93	1.00
85670	THROMBIN TIME; PLASMA	1	2	0	2	\$26.46	\$13.23	\$13.23	1.00
86002	AGGLUTININS; PANEL	1	1	0	1	\$9.00	\$9.00	\$9.00	1.00
86019	RBC ANTIBODY ELUTION	1	2	0	3	\$6.00	\$2.00	\$3.00	1.50
86021	WBC ANTIBODY IDENTIFICATION	1	1	0	1	\$41.04	\$41.04	\$41.04	1.00
86024	RBC ANTIBODY IDENTIFICATION	1	2	0	2	\$8.00	\$4.00	\$4.00	1.00
86031	ANTIHUMAN GLOBULIN TEST	1	4	0	7	\$14.00	\$2.00	\$3.50	1.75
86070	BLOOD COMPATIBILITY TEST	1	3	0	14	\$49.00	\$3.50	\$16.33	4.67
86084	BLOOD TYPING; ANTIGEN SCREEN	1	1	0	2	\$12.00	\$6.00	\$12.00	2.00
86095	BLOOD TYPING; OTHER ANTIGENS	1	1	0	3	\$197.93	\$65.98	\$197.93	3.00
86100	BLOOD TYPING, RH(D) ONLY	1	1	0	1	\$18.75	\$18.75	\$18.75	1.00
86115	BLOOD TYPING, RHOGAM TYPE	1	1	0	1	\$7.89	\$7.89	\$7.89	1.00
86290	HEPATITIS BC ANTIBODY TEST	1	1	0	1	\$63.77	\$63.77	\$63.77	1.00
86293	HEPATITIS BE ANTIBODY TEST	1	1	0	1	\$43.04	\$43.04	\$43.04	1.00
86300	HETEROPHILE ANTIBODY SCREEN	1	1	0	1	\$42.20	\$42.20	\$42.20	1.00
86319	IMMUNOASSAY FOR DRUGS	1	3	0	11	\$132.00	\$12.00	\$44.00	3.67
86349	LEUKOCYTE TRANSFUSION	1	2	0	3	\$101.25	\$33.75	\$50.63	1.50
86353	LYMPHOCYTE TRANSFORMATION	1	1	0	7	\$1,120.00	\$160.00	\$1,120.00	7.00
86382	NEUTRALIZATION TEST, VIRAL	1	1	0	2	\$44.00	\$22.00	\$44.00	2.00
86592	BLOOD SEROLOGY, QUALITATIVE	1	2	0	2	\$32.35	\$16.17	\$16.17	1.00
86595	TISSUE CULTURE	1	1	0	2	\$54.65	\$27.32	\$54.65	2.00
86600	TOXOPLASMOSES, DYE TEST	1	1	0	1	\$30.21	\$30.21	\$30.21	1.00
86687	HTLV I ANTIBODY DETECTION	1	1	0	1	\$35.88	\$35.88	\$35.88	1.00
86812	HLA TYPING, A, B, OR C	1	1	0	1	\$202.00	\$202.00	\$202.00	1.00
86816	HLA TYPING, DR	1	1	0	2	\$128.00	\$64.00	\$128.00	2.00
87045	STOOL CULTURE FOR BACTERIA	1	1	0	1	\$68.00	\$68.00	\$68.00	1.00
87075	CULTURE SPECIMEN, BACTERIA	1	1	0	1	\$19.57	\$19.57	\$19.57	1.00
87076	BACTERIA IDENTIFICATION	1	1	0	1	\$58.00	\$58.00	\$58.00	1.00
87081	BACTERIA CULTURE SCREEN	1	1	0	1	\$12.83	\$12.83	\$12.83	1.00
87085	CULTURE OF SPECIMEN BY KIT	1	1	0	1	\$35.00	\$35.00	\$35.00	1.00
87101	SKIN FUNGUS CULTURE	1	1	0	1	\$32.00	\$32.00	\$32.00	1.00
87102	FUNGUS ISOLATION CULTURE	1	2	0	2	\$1,237.06	\$618.53	\$618.53	1.00
87103	BLOOD FUNGUS CULTURE	1	3	0	35	\$157.50	\$4.50	\$52.50	11.67
87106	FUNGUS IDENTIFICATION	1	4	0	11	\$99.00	\$9.00	\$24.75	2.75
87118	MYCOBACTERIA IDENTIFICATION	1	1	0	1	\$39.00	\$39.00	\$39.00	1.00
87177	OVA AND PARASITES SMEARS	1	1	0	1	\$4.50	\$4.50	\$4.50	1.00
87178	MICROBE IDENTIFICATION	1	1	0	1	\$49.75	\$49.75	\$49.75	1.00
87181	ANTIBIOTIC SENSITIVITY, EACH	1	2	0	11	\$50.50	\$4.59	\$25.25	5.50
87186	ANTIBIOTIC SENSITIVITY, MIC	1	1	0	6	\$48.00	\$8.00	\$48.00	6.00
87188	ANTIBIOTIC SENSITIVITY, EACH	1	1	0	1	\$5.50	\$5.50	\$5.50	1.00
87206	SMEAR, STAIN & INTERPRET	1	1	0	1	\$2.50	\$2.50	\$2.50	1.00
87207	SMEAR, STAIN & INTERPRET	1	1	0	1	\$2.50	\$2.50	\$2.50	1.00
87208	SMEAR, STAIN & INTERPRET	1	1	0	1	\$3.50	\$3.50	\$3.50	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
87252	VIRUS INOCULATION FOR TEST	1	3	0	10	\$48.75	\$4.88	\$16.25	3.33
87999	MICROBIOLOGY PROCEDURE	1	1	0	1	\$20.00	\$20.00	\$20.00	1.00
88161	CYTOPATHOLOGY	1	1	0	-1	\$-37.00	\$37.00	\$-37.00	-1.00
88199	CYTOPATHOLOGY PROCEDURE	1	1	0	1	\$47.00	\$47.00	\$47.00	1.00
88233	TISSUE CULTURE, SKIN/BIOPSY	1	1	0	1	\$42.50	\$42.50	\$42.50	1.00
88280	CHROMOSOME KARYOTYPE STUDY	1	1	0	1	\$90.00	\$90.00	\$90.00	1.00
88285	CHROMOSOME COUNT: ADDITIONAL	1	1	0	1	\$18.00	\$18.00	\$18.00	1.00
88309	TISSUE EXAM BY PATHOLOGIST	1	2	0	2	\$79.60	\$39.80	\$39.80	1.00
88318	CHEMICAL HISTOCHEMISTRY	1	1	0	1	\$20.40	\$20.40	\$20.40	1.00
88325	COMPREHENSIVE REVIEW OF DATA	1	1	0	1	\$67.50	\$67.50	\$67.50	1.00
88331	PATHOLOGY CONSULT IN SURGERY	1	2	0	3	\$313.60	\$104.53	\$156.80	1.50
88332	PATHOLOGY CONSULT IN SURGERY	1	1	0	1	\$74.40	\$74.40	\$74.40	1.00
88348	ELECTRON MICROSCOPY	1	1	0	1	\$335.00	\$335.00	\$335.00	1.00
88349	SCANNING ELECTRON MICROSCOPY	1	1	0	1	\$44.00	\$44.00	\$44.00	1.00
90115	HOME VISIT, NEW, INTERMED	1	1	1	1	\$52.00	\$52.00	\$52.00	1.00
90517	EMERGENCY CARE, NEW, EXTEND	1	1	1	1	\$103.45	\$103.45	\$103.45	1.00
90520	EMERGENCY CARE, NEW, COMPRHEN	1	1	1	1	\$64.00	\$64.00	\$64.00	1.00
90550	EMERGENCY CARE, LIMITED	1	1	1	1	\$26.14	\$26.14	\$26.14	1.00
90788	INJECTION OF ANTIBIOTIC	1	2	0	8	\$256.00	\$32.00	\$128.00	4.00
90825	EVALUATION OF TESTS/RECORDS	1	1	0	1	\$100.00	\$100.00	\$100.00	1.00
90847	SPECIAL FAMILY THERAPY	1	2	0	2	\$125.00	\$62.50	\$62.50	1.00
90899	PSYCHIATRIC SERVICE/THERAPY	1	1	0	1	\$50.00	\$50.00	\$50.00	1.00
90945	DIALYSIS, ONE EVALUATION	1	2	0	15	\$1,482.00	\$98.80	\$741.00	7.50
90947	DIALYSIS, REPEATED EVAL.	1	1	0	6	\$1,950.00	\$325.00	\$1,950.00	6.00
92002	EYE EXAM, NEW PATIENT	1	1	1	1	\$45.00	\$45.00	\$45.00	1.00
92081	VISUAL FIELD EXAMINATION(S)	1	1	0	2	\$84.00	\$42.00	\$84.00	2.00
92499	EYE SERVICE OR PROCEDURE	1	1	1	2	\$2.15	\$1.08	\$2.15	2.00
92506	SPEECH & HEARING EVALUATION	1	1	0	1	\$95.20	\$95.20	\$95.20	1.00
92507	SPEECH/HEARING THERAPY	1	1	5	5	\$379.00	\$75.80	\$379.00	5.00
92511	NASOPHARYNGOSCOPY	1	1	1	2	\$280.00	\$140.00	\$280.00	2.00
92567	TYMPANOMETRY	1	1	0	1	\$22.00	\$22.00	\$22.00	1.00
92585	BRAINSTEM EVOKED AUDIOMETRY	1	2	0	2	\$130.00	\$65.00	\$65.00	1.00
93012	TRANSMISSION OF ECG	1	1	1	1	\$21.71	\$21.71	\$21.71	1.00
93018	CARDIOVASCULAR STRESS TEST	1	1	0	1	\$79.57	\$79.57	\$79.57	1.00
93042	RHYTHM ECG, REPORT	1	1	0	1	\$12.75	\$12.75	\$12.75	1.00
93505	BIOPSY OF HEART LINING	1	1	0	1	\$305.00	\$305.00	\$305.00	1.00
93549	HEART CATHETER & ANGIOGRAM	1	1	0	1	\$943.09	\$943.09	\$943.09	1.00
93875	EXTRACRANIAL STUDY	1	2	0	4	\$336.80	\$84.20	\$168.40	2.00
93950	LIMB VEIN STUDY	1	1	0	1	\$30.70	\$30.70	\$30.70	1.00
93975	VISCERAL VASCULAR STUDY	1	2	0	5	\$886.80	\$177.36	\$443.40	2.50
94160	VITAL CAPACITY SCREENING	1	1	1	1	\$19.00	\$19.00	\$19.00	1.00
94260	THORACIC GAS VOLUME	1	2	4	4	\$95.00	\$23.75	\$47.50	2.00
94662	NEG PRESSURE VENTILATION, CNP	1	1	0	1	\$125.00	\$125.00	\$125.00	1.00
94680	EXHALED AIR ANALYSIS: O2	1	2	0	2	\$185.82	\$92.91	\$92.91	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
94681	EXHALED AIR ANALYSIS: O2,CO2	1	1	0	1	\$31.00	\$31.00	\$31.00	1.00
94705	ARTERIAL BLOOD GAS ANALYSES	1	1	0	1	\$26.25	\$26.25	\$26.25	1.00
94770	EXHALED CARBON DIOXIDE TEST	1	1	0	2	\$26.30	\$13.15	\$26.30	2.00
95125	IMMUNOTHERAPY, MANY ANTIGENS	1	1	1	1	\$8.63	\$8.63	\$8.63	1.00
95821	PORTABLE EEG	1	1	0	1	\$70.00	\$70.00	\$70.00	1.00
95860	MUSCLE TEST, ONE LIMB	1	1	1	1	\$90.91	\$90.91	\$90.91	1.00
95882	COGNITIVE FUNCTION TESTING	1	1	1	1	\$135.00	\$135.00	\$135.00	1.00
95904	SENSE NERVE CONDUCTION TEST	1	1	2	2	\$75.00	\$37.50	\$75.00	2.00
97010	HOT OR COLD PACKS THERAPY	1	1	2	2	\$21.00	\$10.50	\$21.00	2.00
97012	MECHANICAL TRACTION THERAPY	1	1	1	1	\$11.25	\$11.25	\$11.25	1.00
97110	THERAPEUTIC EXERCISES 30 MIN	1	1	1	1	\$70.00	\$70.00	\$70.00	1.00
97126	CONTRAST BATHS THERAPY	1	1	1	1	\$18.75	\$18.75	\$18.75	1.00
97128	ULTRASOUND THERAPY	1	1	2	2	\$21.00	\$10.50	\$21.00	2.00
97540	TRAINING FOR DAILY LIVING	1	1	0	4	\$265.00	\$66.25	\$265.00	4.00
97700	TRAINING CHECKOUT	1	1	0	1	\$48.00	\$48.00	\$48.00	1.00
99090	COMPUTER DATA ANALYSIS	1	3	0	10	\$54.41	\$5.44	\$18.14	3.33
99170	GASTRIC INTUBATION TREATMENT	1	1	0	2	\$112.50	\$56.25	\$112.50	2.00
99192	SPECIAL PUMP SERVICES	1	3	0	31	\$4,247.00	\$137.00	\$1,415.67	10.33
99202	OFFICE/OUTPATIENT VISIT, NEW	1	1	1	1	\$45.00	\$45.00	\$45.00	1.00
99205	OFFICE/OUTPATIENT VISIT, NEW	1	1	1	1	\$97.31	\$97.31	\$97.31	1.00
99212	OFFICE/OUTPATIENT VISIT, EST	1	1	1	1	\$30.60	\$30.60	\$30.60	1.00
99222	INITIAL HOSPITAL CARE	1	1	0	1	\$191.00	\$191.00	\$191.00	1.00
99245	OFFICE CONSULTATION	1	1	1	1	\$45.15	\$45.15	\$45.15	1.00
99251	INITIAL INPATIENT CONSULT	1	1	0	1	\$40.80	\$40.80	\$40.80	1.00
99281	EMERGENCY DEPT VISIT	1	1	1	1	\$12.00	\$12.00	\$12.00	1.00
99282	EMERGENCY DEPT VISIT	1	1	11	11	\$395.46	\$35.95	\$395.46	11.00
99285	EMERGENCY DEPT VISIT	1	1	1	1	\$92.15	\$92.15	\$92.15	1.00
99341	HOME VISIT, NEW PATIENT	1	2	2	2	\$4,478.46	\$2,239.23	\$2,239.23	1.00
TYPE		7,754	1,534	21,555	\$1,779,941.58				

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
99070	SPECIAL SUPPLIES	74	501	2	5,817	\$595,936.85	\$102.45	\$1,189.49	11.61
84999	CLINICAL CHEMISTRY TEST	66	372	0	3,128	\$276,920.92	\$88.53	\$744.41	8.41
71020	CHEST X-RAY	63	226	0	315	\$7,292.11	\$23.15	\$32.27	1.39
90220	HOSPITAL CARE, NEW, COMPREH	50	130	5	138	\$16,121.50	\$116.82	\$124.01	1.06
76499	RADIOGRAPHIC PROCEDURE	48	107	0	202	\$39,233.53	\$194.23	\$366.67	1.89
90060	OFFICE/OP VISIT, EST, INTERM	47	151	182	182	\$5,657.40	\$31.08	\$37.47	1.21

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV (continued) -----

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
71010	CHEST X-RAY	45	155	0	258	\$4,506.10	\$17.47	\$29.07	1.66
90015	OFFICE/OP VISIT, NEW, INTERM	42	129	153	317	\$29,108.46	\$91.82	\$225.65	2.46
90260	HOSPITAL VISIT, INTERMEDIATE	42	209	21	748	\$35,701.87	\$47.73	\$170.82	3.58
90620	COMPREHENSIVE CONSULTATION	41	73	15	75	\$8,517.85	\$113.57	\$116.68	1.03
85095	BONE MARROW ASPIRATION	39	83	0	90	\$6,343.64	\$70.48	\$76.43	1.08
90250	HOSPITAL VISIT, LIMITED	39	219	36	809	\$33,194.62	\$41.03	\$151.57	3.69
90292	HOSPITAL DISCHARGE DAY	39	97	2	112	\$6,202.13	\$55.38	\$63.94	1.15
93010	ELECTROCARDIOGRAM REPORT	36	56	11	77	\$1,272.36	\$16.52	\$22.72	1.38
88313	SPECIAL STAINS	32	56	0	101	\$2,056.14	\$20.36	\$36.72	1.80
90050	OFFICE/OP VISIT, EST, LTD	32	76	89	89	\$2,328.48	\$26.16	\$30.64	1.17
85102	BONE MARROW BIOPSY	27	43	0	50	\$3,728.06	\$74.56	\$86.70	1.16
90215	HOSPITAL CARE, NEW, INTERMED	27	59	2	60	\$6,021.50	\$100.36	\$102.06	1.02
90270	HOSPITAL VISIT, EXTENDED	27	109	15	371	\$24,171.79	\$65.15	\$221.76	3.40
88304	TISSUE EXAM BY PATHOLOGIST	25	104	0	51	\$2,989.83	\$58.62	\$78.68	1.34
36430	BLOOD TRANSFUSION SERVICE	24	38	0	195	\$11,048.01	\$56.66	\$106.23	1.88
62270	SPINAL FLUID TAP, DIAGNOSTIC	24	45	0	57	\$5,968.80	\$104.72	\$132.64	1.27
88104	MICROSCOPIC EXAM OF CELLS	24	37	0	49	\$1,172.71	\$23.93	\$31.69	1.32
90515	EMERGENCY CARE, NEW, INTERMED	24	42	38	53	\$3,998.84	\$75.45	\$95.21	1.26
90782	INJECTION (SC)/(IM)	24	65	735	735	\$22,139.72	\$30.12	\$340.61	11.31
93307	ECHO EXAM OF HEART	24	50	18	51	\$8,261.91	\$162.00	\$165.24	1.02
90280	HOSPITAL VISIT, COMPREHENSIVE	22	56	3	243	\$30,423.82	\$125.20	\$543.28	4.34
96410	CHEMOTHERAPY, INFUSION METHOD	22	69	25	143	\$8,244.19	\$57.65	\$119.48	2.07
36491	INSERTION OF CATHETER, VEIN	21	31	0	57	\$16,182.74	\$283.91	\$522.02	1.84
85097	BONE MARROW INTERPRETATION	21	41	0	45	\$2,530.65	\$56.24	\$61.72	1.10
85100	BONE MARROW EXAMINATION	21	46	0	59	\$5,306.90	\$89.95	\$115.37	1.28
90070	OFFICE/OP VISIT, EST, EXTEND	21	37	39	28	\$1,771.40	\$45.42	\$47.88	1.05
70220	X-RAY EXAM OF SINUSES	20	28	0	39	\$731.37	\$26.12	\$26.12	1.00
90030	OFFICE/OP VISIT, EST, MINIM	20	49	97	97	\$1,104.25	\$11.38	\$22.54	1.98
74160	CONTRAST CAT SCAN OF ABDOMEN	19	28	0	31	\$6,309.07	\$203.52	\$225.32	1.11
88305	TISSUE EXAM BY PATHOLOGIST	19	37	0	48	\$4,182.99	\$87.15	\$113.05	1.30
90610	EXTENDED CONSULTATION	19	31	6	32	\$2,745.83	\$85.81	\$88.58	1.03
90641	LIMITED FOLLOW-UP CONSULT	19	37	26	65	\$3,182.22	\$48.96	\$86.01	1.76
93320	DOPPLER ECHO EXAM, HEART	19	28	8	28	\$2,984.78	\$106.60	\$106.60	1.00
96450	CHEMOTHERAPY, INTO CNS	19	54	34	62	\$5,383.36	\$86.83	\$99.69	1.15
36489	INSERTION OF CATHETER, VEIN	18	29	0	36	\$6,835.26	\$189.87	\$235.70	1.24
90040	OFFICE/OP VISIT, EST, BRIEF	18	35	39	40	\$943.49	\$23.59	\$26.96	1.14
90240	HOSPITAL VISIT, BRIEF	18	46	0	172	\$6,345.38	\$36.89	\$137.94	3.74
90630	COMPLEX CONSULTATION	18	26	9	28	\$4,060.66	\$145.02	\$156.18	1.08
90642	INTERMEDIATE FOLLOWUP CONSULT	18	29	18	28	\$1,795.53	\$44.89	\$61.91	1.38
85103	BONE MARROW BIOPSY & EXAM	17	30	0	36	\$1,526.70	\$42.41	\$50.89	1.20
88346	IMMUNOFLUORESCENT STUDY	17	35	0	71	\$1,950.92	\$27.48	\$55.74	2.03
85105	BONE MARROW, INTERPRETATION	16	28	0	29	\$1,451.85	\$50.06	\$51.85	1.04
99232	SUBSEQUENT HOSPITAL CARE	16	68	8	154	\$9,711.15	\$63.06	\$142.81	2.26
11100	BIOPSY OF SKIN LESION	15	17	0	19	\$1,028.92	\$54.15	\$60.52	1.12

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
85023	AUTOMATED HEMOGRAM	15	64	0	138	\$2,196.01	\$15.91	\$34.31	2.16
86317	IMMUNOASSAY, INFECTIOUS AGENT	15	38	0	51	\$698.44	\$13.69	\$18.38	1.34
90605	INTERMEDIATE CONSULTATION	15	23	59	73	\$1,474.46	\$20.20	\$64.11	3.17
90784	INJECTION (IV)	15	41	150	152	\$6,709.58	\$44.14	\$163.65	3.71
99160	CRITICAL CARE, EACH HOUR	15	38	1	44	\$6,995.85	\$159.00	\$184.10	1.16
70450	CAT SCAN OF HEAD OR BRAIN	14	21	0	23	\$3,588.22	\$156.01	\$170.87	1.10
99199	SPECIAL SERVICE OR REPORT	14	38	0	179	\$10,039.83	\$56.09	\$264.21	4.71
74000	X-RAY EXAM OF ABDOMEN	13	29	0	41	\$792.20	\$19.32	\$27.32	1.41
90080	OFFICE/OP VISIT, EST, COMPRH	13	26	30	29	\$1,953.32	\$67.36	\$75.13	1.12
36415	DRAWING BLOOD	12	21	0	21	\$119.29	\$5.68	\$5.68	1.00
88312	SPECIAL STAINS	12	22	0	61	\$1,450.16	\$23.77	\$65.92	2.77
90640	BRIEF FOLLOW-UP CONSULT	12	24	20	26	\$678.20	\$26.08	\$28.26	1.08
99213	OFFICE/OUTPATIENT VISIT, EST	12	24	30	31	\$1,168.84	\$37.70	\$48.70	1.29
36495	IMPLANT INFUSION PUMP	11	13	0	14	\$9,402.80	\$671.63	\$723.29	1.08
81000	URINALYSIS WITH MICROSCOPY	11	28	0	35	\$230.96	\$6.60	\$8.25	1.25
87250	VIRUS INOCULATION FOR TEST	11	33	0	70	\$2,225.82	\$31.80	\$67.45	2.12
88307	TISSUE EXAM BY PATHOLOGIST	11	13	0	15	\$2,178.91	\$145.26	\$167.61	1.15
94010	BREATHING CAPACITY TEST	11	11	9	11	\$331.72	\$30.16	\$30.16	1.00
96408	CHEMOTHERAPY, PUSH TECHNIQUE	11	18	14	28	\$1,319.27	\$47.12	\$73.29	1.56
96412	CHEMOTHERAPY, INFUSION METHOD	11	29	14	150	\$9,840.15	\$65.60	\$339.32	5.17
99000	SPECIMEN HANDLING	11	19	0	23	\$280.08	\$12.18	\$14.74	1.21
71250	CAT SCAN OF CHEST	10	13	0	14	\$2,487.86	\$177.70	\$191.37	1.08
76700	ECHO EXAM OF ABDOMEN	10	20	0	21	\$1,567.53	\$74.64	\$78.38	1.05
78471	NUCLEAR SCAN, HEART MUSCLE	10	12	0	14	\$1,868.30	\$133.45	\$155.69	1.17
90600	LIMITED CONSULTATION	10	12	48	56	\$839.26	\$14.99	\$69.94	4.67
90780	IV INFUSION THERAPY, 1 HOUR	10	39	41	58	\$3,573.01	\$61.60	\$91.62	1.49
93308	ECHO EXAM OF HEART	10	14	3	15	\$1,235.90	\$82.39	\$88.28	1.07
93799	CARDIOVASCULAR PROCEDURE	10	18	6	23	\$2,020.37	\$87.84	\$112.24	1.28
94720	MONOXIDE DIFFUSING CAPACITY	10	12	9	14	\$393.94	\$28.14	\$32.83	1.17
96400	CHEMOTHERAPY, (SC)/(IM)	10	19	13	23	\$918.55	\$39.94	\$48.34	1.21
96545	PROVIDE CHEMOTHERAPY AGENT	10	14	32	32	\$3,417.06	\$106.78	\$244.08	2.29
20220	BONE BIOPSY, TROCAR/NEEDLE	9	20	0	26	\$3,683.15	\$141.66	\$184.16	1.30
70551	MAGNETIC IMAGE, BRAIN (MRI)	9	13	0	13	\$5,833.30	\$448.72	\$448.72	1.00
71260	CONTRAST CAT SCAN OF CHEST	9	14	0	14	\$2,751.49	\$196.54	\$196.54	1.00
74150	CAT SCAN OF ABDOMEN	9	10	0	12	\$1,778.08	\$148.17	\$177.81	1.20
80500	LAB PATHOLOGY CONSULTATION	9	20	0	35	\$1,421.18	\$40.61	\$71.06	1.75
85060	BLOOD SMEAR INTERPRETATION	9	23	0	26	\$762.43	\$29.32	\$33.15	1.13
88180	CELL MARKER STUDY	9	16	0	142	\$3,389.10	\$23.87	\$211.82	8.88
88311	DECALCIFY TISSUE	9	11	0	13	\$243.36	\$18.72	\$22.12	1.18
94240	RESIDUAL LUNG CAPACITY	9	11	10	13	\$383.04	\$29.46	\$34.82	1.18
99223	INITIAL HOSPITAL CARE	9	17	0	17	\$2,414.22	\$142.01	\$142.01	1.00
99233	SUBSEQUENT HOSPITAL CARE	9	28	0	63	\$5,333.18	\$84.65	\$190.47	2.25
99238	HOSPITAL DISCHARGE DAY	9	16	0	16	\$944.59	\$59.04	\$59.04	1.00
99254	INITIAL INPATIENT CONSULT	9	9	1	9	\$1,197.31	\$133.03	\$133.03	1.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDBP)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
31622	DIAGNOSTIC BRONCHOSCOPY	8	8	0	10	\$3,827.00	\$382.70	\$478.37	1.25
74020	X-RAY EXAM OF ABDOMEN	8	15	0	16	\$431.27	\$26.95	\$28.75	1.07
76000	FLUOROSCOPE EXAMINATION	8	8	0	9	\$302.85	\$33.65	\$37.86	1.13
83735	ASSAY BLOOD MAGNESIUM	8	40	0	88	\$1,198.16	\$13.62	\$29.95	2.20
85022	AUTOMATED HEMOGRAM	8	16	0	38	\$239.35	\$6.30	\$14.96	2.38
85027	AUTOMATED HEMOGRAM	8	20	0	42	\$460.76	\$10.97	\$23.04	2.10
85730	THROMBOPLASTIN TIME, PARTIAL	8	9	0	9	\$105.63	\$11.74	\$11.74	1.00
88342	IMMUNOCYTOCHEMISTRY	8	8	0	24	\$874.50	\$36.44	\$109.31	3.00
90200	HOSPITAL CARE, NEW, BRIEF	8	12	0	12	\$929.95	\$77.50	\$77.50	1.00
70470	CONTRAST CAT SCANS OF HEAD	7	8	0	8	\$1,626.20	\$203.28	\$203.28	1.00
70486	CAT SCAN OF FACE, JAW	7	9	0	9	\$1,510.35	\$167.82	\$167.82	1.00
72192	CAT SCAN OF PELVIS	7	8	0	9	\$1,199.05	\$133.23	\$149.88	1.13
72193	CONTRAST CAT SCAN OF PELVIS	7	12	0	13	\$2,351.85	\$180.91	\$195.99	1.08
76770	ECHO EXAM ABDOMEN BACK WALL	7	8	0	9	\$515.60	\$57.29	\$64.45	1.13
82947	ASSAY BODY FLUID, GLUCOSE	7	15	0	15	\$138.47	\$9.23	\$9.23	1.00
85007	DIFFERENTIAL WBC COUNT	7	71	0	97	\$475.82	\$4.91	\$6.70	1.37
86068	BLOOD COMPATIBILITY TEST	7	35	0	60	\$898.10	\$14.97	\$25.66	1.71
86999	IMMUNOLOGY PROCEDURE	7	21	0	37	\$6,257.07	\$169.11	\$297.96	1.76
88331	PATHOLOGY CONSULT IN SURGERY	7	7	0	8	\$851.00	\$106.38	\$121.57	1.14
90643	COMPLEX FOLLOW-UP CONSULT	7	13	6	19	\$1,435.72	\$75.56	\$110.44	1.46
93325	DOPPLER COLOR FLOW	7	10	6	13	\$740.80	\$56.98	\$74.08	1.30
96330	PUMP REFILLING, MAINTENANCE	7	29	30	33	\$1,642.83	\$49.78	\$56.65	1.14
96549	CHEMOTHERAPY, UNSPECIFIED	7	21	60	74	\$5,108.03	\$69.03	\$243.24	3.52
99173	CRITICAL CARE, FOLLOW-UP	7	40	0	204	\$17,749.20	\$87.01	\$443.73	5.10
99174	CRITICAL CARE, FOLLOW-UP	7	18	0	63	\$8,104.74	\$128.65	\$450.26	3.50
99222	INITIAL HOSPITAL CARE	7	8	0	8	\$936.02	\$117.00	\$117.00	1.00
38230	BONE MARROW COLLECTION	6	6	0	5	\$5,083.08	\$1,016.62	\$847.18	0.83
76705	ECHO EXAM OF ABDOMEN	6	9	0	11	\$814.82	\$74.07	\$90.54	1.22
80016	13-16 BLOOD/URINE TESTS	6	22	0	40	\$1,078.11	\$26.95	\$49.01	1.82
80018	17-18 BLOOD/URINE TESTS	6	56	0	165	\$1,956.39	\$11.86	\$34.94	2.95
82977	ASSAY OF GGT ENZYME	6	16	0	79	\$392.05	\$4.96	\$24.50	4.94
85025	AUTOMATED HEMOGRAM	6	71	0	100	\$1,485.88	\$14.86	\$20.93	1.41
85109	BONE MARROW PREPARATION	6	8	0	8	\$175.69	\$21.96	\$21.96	1.00
85580	BLOOD PLATELET COUNT	6	6	0	14	\$72.94	\$5.21	\$12.16	2.33
85595	ELECTRONIC PLATELET COUNT	6	24	0	34	\$456.75	\$13.43	\$19.03	1.42
85610	PROTHROMBIN TIME	6	7	0	7	\$72.30	\$10.33	\$10.33	1.00
86329	IMMUNODIFFUSION, EACH	6	7	0	19	\$627.67	\$33.04	\$89.67	2.71
87040	BLOOD CULTURE FOR BACTERIA	6	15	0	22	\$306.19	\$13.92	\$20.41	1.47
88237	TISSUE CULTURE, BONE MARROW	6	7	0	7	\$1,530.25	\$218.61	\$218.61	1.00
89051	BODY FLUID CELL COUNT	6	12	0	12	\$159.04	\$13.25	\$13.25	1.00
90020	OFFICE/OP VISIT, NEW, COMPRH	6	6	6	6	\$573.73	\$95.62	\$95.62	1.00
90517	EMERGENCY CARE, NEW, EXTEND	6	7	6	7	\$774.10	\$110.59	\$110.59	1.00
90560	EMERGENCY CARE, INTERMEDIATE	6	10	17	17	\$750.20	\$44.13	\$75.02	1.70
90844	PSYCHOTHERAPY, 45-50 MIN	6	8	13	14	\$920.64	\$65.76	\$115.08	1.75

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
93000	ELECTROCARDIOGRAM, COMPLETE	6	7	3	7	\$184.26	\$26.32	\$26.32	1.00
94200	LUNG FUNCTION TEST (MBC/MVV)	6	6	6	6	\$119.49	\$19.92	\$19.92	1.00
99215	OFFICE/OUTPATIENT VISIT, EST	6	11	12	12	\$881.75	\$73.48	\$80.16	1.09
99231	SUBSEQUENT HOSPITAL CARE	6	9	0	25	\$1,229.20	\$49.17	\$136.58	2.78
36000	PLACE NEEDLE IN VEIN	5	11	0	11	\$487.68	\$44.33	\$44.33	1.00
36410	DRAWING BLOOD	5	9	0	10	\$201.36	\$20.14	\$22.37	1.11
36620	INSERTION CATHETER, ARTERY	5	6	0	6	\$536.28	\$89.38	\$89.38	1.00
45331	SIGMOIDOSCOPY AND BIOPSY	5	6	0	6	\$823.25	\$137.21	\$137.21	1.00
74010	X-RAY EXAM OF ABDOMEN	5	6	0	10	\$308.59	\$30.86	\$51.43	1.67
77285	SET RADIATION THERAPY FIELD	5	5	0	6	\$1,434.70	\$239.12	\$286.94	1.20
78306	NUCLEAR SCAN OF SKELETON	5	9	0	9	\$757.49	\$84.17	\$84.17	1.00
80031	DRUG MONITORING, ONE DRUG	5	8	0	18	\$1,058.72	\$58.82	\$132.34	2.25
82565	ASSAY BLOOD CREATININE	5	5	0	5	\$45.84	\$9.17	\$9.17	1.00
86083	BLOOD TYPING;ANTIBODY SCREEN	5	28	0	34	\$443.74	\$13.05	\$15.85	1.21
86817	HIA TYPING, DR	5	10	0	17	\$5,834.50	\$343.21	\$583.45	1.70
87072	CULTURE OF SPECIMEN BY KIT	5	8	0	16	\$422.25	\$26.39	\$52.78	2.00
88160	CYTOPATHOLOGY	5	10	0	12	\$248.84	\$20.74	\$24.88	1.20
88262	CHROMOSOME COUNT:15-20 CELLS	5	6	0	6	\$1,258.25	\$209.71	\$209.71	1.00
88309	TISSUE EXAM BY PATHOLOGIST	5	9	0	11	\$2,141.85	\$194.71	\$237.98	1.22
90781	IV INFUSION, ADDITIONAL HOUR	5	12	28	28	\$876.46	\$31.30	\$73.04	2.33
96414	CHEMOTHERAPY,INFUSION METHOD	5	13	9	18	\$2,582.15	\$143.45	\$198.63	1.38
96520	PUMP REFILLING, MAINTENANCE	5	14	17	18	\$531.20	\$29.51	\$37.94	1.29
98902	CONFERENCE WITH PHYSICIAN	5	5	0	5	\$408.35	\$81.67	\$81.67	1.00
99211	OFFICE/OUTPATIENT VISIT, EST	5	20	42	42	\$538.70	\$12.83	\$26.93	2.10
99214	OFFICE/OUTPATIENT VISIT, EST	5	21	22	22	\$1,044.14	\$47.46	\$49.72	1.05
99252	INITIAL INPATIENT CONSULT	5	5	0	5	\$386.60	\$77.32	\$77.32	1.00
36600	WITHDRAWAL OF ARTERIAL BLOOD	4	4	0	5	\$274.55	\$54.91	\$68.64	1.25
38999	BLOOD/LYMPH SYSTEM PROCEDURE	4	4	0	5	\$3,044.50	\$608.90	\$761.13	1.25
70355	PANORAMIC X-RAY OF JAWS	4	4	0	4	\$96.54	\$24.14	\$24.14	1.00
70552	MAGNETIC IMAGE, BRAIN (MRI)	4	4	0	4	\$2,905.65	\$726.41	\$726.41	1.00
74170	CONTRAST CAT SCANS, ABDOMEN	4	5	0	5	\$971.10	\$194.22	\$194.22	1.00
77261	RADIATION THERAPY PLANNING	4	4	0	5	\$810.15	\$162.03	\$202.54	1.25
77280	SET RADIATION THERAPY FIELD	4	4	0	4	\$276.15	\$69.04	\$69.04	1.00
77300	RADIATION THERAPY DOSE PLAN	4	5	0	6	\$349.37	\$58.23	\$69.87	1.20
78472	NUCLEAR SCAN, HEART MUSCLE	4	4	0	4	\$460.74	\$115.19	\$115.19	1.00
80012	12 CLINICAL CHEMISTRY TESTS	4	5	0	5	\$119.38	\$23.88	\$23.88	1.00
82150	ASSAY OF SERUM AMYLASE	4	16	0	31	\$220.00	\$7.10	\$13.75	1.94
82310	ASSAY CALCIUM IN BLOOD	4	9	0	10	\$171.56	\$17.16	\$19.06	1.11
84450	UV-ASSAY TRANSAMINASE (SGOT)	4	16	0	24	\$488.75	\$20.36	\$30.55	1.50
84520	ASSAY BUN	4	4	0	6	\$51.91	\$8.65	\$12.98	1.50
85021	AUTOMATED HEMOGRAM	4	19	0	24	\$492.36	\$20.51	\$25.91	1.26
85024	AUTOMATED HEMOGRAM	4	4	0	5	\$88.81	\$17.76	\$17.76	1.00
86082	BLOOD TYPING, ABO & RH(D)	4	9	0	11	\$87.89	\$7.99	\$9.77	1.22
86171	COMPLEMENT FIXATION, EACH	4	5	0	5	\$246.25	\$49.25	\$49.25	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
87070	CULTURE SPECIMEN, BACTERIA	4	8	0	10	\$163.50	\$16.35	\$20.44	1.25
87205	SMEAR, STAIN & INTERPRET	4	11	0	13	\$73.30	\$5.64	\$6.66	1.18
88106	MICROSCOPIC EXAM OF CELLS	4	7	0	7	\$211.08	\$30.15	\$30.15	1.00
88182	CELL MARKER STUDY	4	5	0	12	\$710.67	\$59.22	\$142.13	2.40
88319	ENZYME HISTOCHEMISTRY	4	7	0	14	\$262.95	\$18.78	\$37.56	2.00
88321	MICROSLIDE CONSULTATION	4	6	0	8	\$412.15	\$51.52	\$68.69	1.33
88348	ELECTRON MICROSCOPY	4	4	0	4	\$910.95	\$227.74	\$227.74	1.00
90520	EMERGENCY CARE, NEW, COMPREH	4	5	6	6	\$567.71	\$94.62	\$113.54	1.20
90699	GENERAL MEDICAL SERVICE	4	4	5	7	\$484.50	\$69.21	\$121.13	1.75
95819	ELECTROENCEPHALOGRAM (EEG)	4	6	0	6	\$369.80	\$61.63	\$61.63	1.00
99082	UNUSUAL PHYSICIAN TRAVEL	4	4	0	12	\$7,823.96	\$652.00	\$1,955.99	3.00
31500	INSERT OF EMERGENCY AIRWAY	3	3	0	3	\$367.38	\$122.46	\$122.46	1.00
31628	BRONCHOSCOPY WITH BIOPSY	3	3	0	3	\$1,112.50	\$370.83	\$370.83	1.00
32000	DRAINAGE OF CHEST	3	4	0	6	\$282.25	\$47.04	\$70.56	1.50
36299	VESSEL INJECTION PROCEDURE	3	7	0	9	\$754.55	\$83.84	\$107.79	1.29
37799	VASCULAR SURGERY PROCEDURE	3	3	0	3	\$800.00	\$266.67	\$266.67	1.00
40490	BIOPSY OF LIP	3	3	0	4	\$401.50	\$100.38	\$133.83	1.33
43235	UPPER GI ENDOSCOPY, DIAGNOSIS	3	3	0	3	\$1,034.06	\$344.69	\$344.69	1.00
43239	UPPER GI ENDOSCOPY, BIOPSY	3	3	0	4	\$1,357.80	\$339.45	\$452.60	1.33
47000	NEEDLE BIOPSY OF LIVER	3	3	0	3	\$672.86	\$224.29	\$224.29	1.00
47100	WEDGE BIOPSY OF LIVER	3	3	0	3	\$1,652.00	\$550.67	\$550.67	1.00
62272	DRAIN SPINAL FLUID	3	5	0	7	\$704.40	\$100.63	\$140.88	1.40
70250	X-RAY EXAM OF SKULL	3	4	0	6	\$227.30	\$37.88	\$56.83	1.50
70460	CONTRAST CAT SCAN OF HEAD	3	4	0	5	\$574.25	\$114.85	\$143.56	1.25
70487	CONTRAST CAT SCAN, FACE/JAW	3	3	0	3	\$446.85	\$148.95	\$148.95	1.00
70491	CONTRAST CAT OF NECK TISSUE	3	3	0	3	\$435.10	\$145.03	\$145.03	1.00
71035	CHEST X-RAY	3	3	0	3	\$62.50	\$20.83	\$20.83	1.00
72170	X-RAY EXAM OF PELVIS	3	3	0	3	\$64.30	\$21.43	\$21.43	1.00
73520	X-RAY EXAM OF HIPS	3	3	0	3	\$150.82	\$50.27	\$50.27	1.00
73590	X-RAY EXAM OF LOWER LEG	3	3	0	4	\$71.22	\$17.81	\$23.74	1.33
74022	X-RAY EXAM SERIES, ABDOMEN	3	6	0	10	\$236.59	\$23.66	\$39.43	1.67
77333	RADIATION TREATMENT AID(S)	3	3	0	3	\$348.60	\$116.20	\$116.20	1.00
77334	RADIATION TREATMENT AID(S)	3	4	0	5	\$568.20	\$113.64	\$142.05	1.25
77420	WEEKLY RADIATION THERAPY	3	3	0	3	\$443.10	\$147.70	\$147.70	1.00
77499	RADIATION THERAPY MANAGEMENT	3	5	0	5	\$183.30	\$36.66	\$36.66	1.00
78580	NUCLEAR SCAN OF LUNG	3	3	0	3	\$236.50	\$78.83	\$78.83	1.00
80006	6 CLINICAL CHEMISTRY TESTS	3	3	0	7	\$233.50	\$33.36	\$77.83	2.33
80007	7 CLINICAL CHEMISTRY TESTS	3	6	0	6	\$587.90	\$97.98	\$97.98	1.00
80019	19 OR MORE BLOOD/URINE TESTS	3	4	0	4	\$112.80	\$28.20	\$28.20	1.00
84195	ASSAY SPINAL FLUID PROTEIN	3	3	0	3	\$52.67	\$17.56	\$17.56	1.00
84460	UV-ASSAY TRANSAMINASE (SGPT)	3	7	0	10	\$70.72	\$7.07	\$10.10	1.43
85018	HEMOGLOBIN, COLORIMETRIC	3	3	0	3	\$12.15	\$4.05	\$4.05	1.00
85044	RETICULOCYTE COUNT	3	5	0	6	\$103.68	\$17.28	\$20.74	1.20
86813	HLA TYPING, A, B, AND/OR C	3	6	0	10	\$741.20	\$74.12	\$123.53	1.67

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
87086	URINE CULTURE, COLONY COUNT	3	6	0	8	\$65.33	\$8.17	\$10.89	1.33
88300	TISSUE EXAM BY PATHOLOGIST	3	3	0	3	\$82.65	\$27.55	\$27.55	1.00
88302	TISSUE EXAM BY PATHOLOGIST	3	4	0	4	\$144.90	\$36.23	\$36.23	1.00
88347	IMMUNOFLUORESCENT STUDY	3	4	0	5	\$436.70	\$87.34	\$109.18	1.25
89050	BODY FLUID CELL COUNT	3	5	0	5	\$75.26	\$15.05	\$15.05	1.00
90150	HOME VISIT, LIMITED	3	3	7	7	\$409.69	\$58.53	\$136.56	2.33
90505	EMERGENCY CARE, NEW, BRIEF	3	3	3	3	\$95.00	\$31.67	\$31.67	1.00
90530	EMERGENCY CARE, MINIMAL	3	7	10	10	\$186.74	\$18.67	\$26.68	1.43
93312	ECHO EXAM OF HEART	3	3	1	3	\$719.50	\$239.83	\$239.83	1.00
93321	DOPPLER ECHO EXAM, HEART	3	3	2	3	\$149.80	\$49.93	\$49.93	1.00
94060	EVALUATION OF WHEEZING	3	5	4	7	\$378.84	\$54.12	\$75.77	1.40
94680	EXHALED AIR ANALYSIS: O2	3	3	0	3	\$270.50	\$90.17	\$90.17	1.00
97799	PHYSICAL MEDICINE PROCEDURE	3	10	48	48	\$4,552.92	\$94.85	\$455.29	4.80
99050	POST-OP FOLLOW-UP VISIT	3	5	0	6	\$169.00	\$28.17	\$33.80	1.20
99172	CRITICAL CARE, FOLLOW-UP	3	3	0	12	\$819.00	\$68.25	\$273.00	4.00
99221	INITIAL HOSPITAL CARE	3	3	0	4	\$203.25	\$50.81	\$67.75	1.33
99244	OFFICE CONSULTATION	3	3	2	3	\$303.10	\$101.03	\$101.03	1.00
99262	FOLLOW-UP INPATIENT CONSULT	3	8	4	12	\$628.60	\$52.38	\$78.58	1.50
99283	EMERGENCY DEPT VISIT	3	3	3	3	\$658.43	\$219.48	\$219.48	1.00
99291	CRITICAL CARE, FIRST HOUR	3	4	0	6	\$1,297.10	\$216.18	\$324.28	1.50
10121	REMOVE FOREIGN BODY	2	2	0	2	\$336.71	\$168.36	\$168.36	1.00
20225	BONE BIOPSY, TROCAR/NEEDLE	2	2	0	2	\$322.65	\$161.33	\$161.33	1.00
20240	BONE BIOPSY, EXCISIONAL	2	3	0	4	\$376.25	\$94.06	\$125.42	1.33
36010	PLACE CATHETER IN VEIN	2	3	0	3	\$945.10	\$315.03	\$315.03	1.00
36490	INSERTION OF CATHETER, VEIN	2	13	0	13	\$748.00	\$57.54	\$57.54	1.00
36497	REMOVE INFUSION PUMP	2	2	0	2	\$558.00	\$279.00	\$279.00	1.00
36520	PLASMA AND/OR CELL EXCHANGE	2	3	0	3	\$857.50	\$285.83	\$285.83	1.00
36800	INSERTION OF CANNULA	2	2	0	2	\$750.00	\$375.00	\$375.00	1.00
38100	REMOVAL OF SPLEEN, TOTAL	2	2	0	4	\$2,552.83	\$638.21	\$1,276.42	2.00
38265	38265	2	2	0	12	\$3,229.40	\$269.12	\$1,614.70	6.00
43246	PLACE GASTROSTOMY TUBE	2	2	0	2	\$1,364.25	\$682.13	\$682.13	1.00
53000	INCISION OF URETHRA	2	2	0	2	\$566.00	\$283.00	\$283.00	1.00
62289	INJECTION INTO SPINAL CANAL	2	2	0	2	\$368.85	\$184.43	\$184.43	1.00
70210	X-RAY EXAM OF SINUSES	2	2	0	2	\$44.00	\$22.00	\$22.00	1.00
70320	FULL MOUTH X-RAY OF TEETH	2	2	0	2	\$39.75	\$19.88	\$19.88	1.00
70480	CAT SCAN OF SKULL	2	2	0	2	\$261.20	\$130.60	\$130.60	1.00
72100	X-RAY EXAM OF LOWER SPINE	2	2	0	2	\$51.40	\$25.70	\$25.70	1.00
73060	X-RAY EXAM OF HUMERUS	2	2	0	2	\$42.20	\$21.10	\$21.10	1.00
73090	X-RAY EXAM OF FOREARM	2	2	0	3	\$28.80	\$9.60	\$14.40	1.50
73510	X-RAY EXAM OF HIP	2	2	0	2	\$28.47	\$14.24	\$14.24	1.00
73550	X-RAY EXAM OF THIGH	2	2	0	2	\$41.80	\$20.90	\$20.90	1.00
74241	X-RAY EXAM UPPER GI TRACT	2	2	0	2	\$122.00	\$61.00	\$61.00	1.00
74245	X-RAY EXAM UPPER GI TRACT	2	2	0	2	\$145.70	\$72.85	\$72.85	1.00
74250	X-RAY EXAM OF SMALL BOWEL	2	2	0	2	\$90.50	\$45.25	\$45.25	1.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
75898	FOLLOW-UP ANGIOGRAM	2	2	0	2	\$223.60	\$111.80	\$111.80	1.00
76062	X-RAYS, BONE SURVEY	2	2	0	2	\$219.00	\$109.50	\$109.50	1.00
76091	MAMMOGRAM, BOTH BREASTS	2	2	0	2	\$103.00	\$51.50	\$51.50	1.00
76375	CAT SCANS, OTHER PLANES	2	3	0	7	\$224.00	\$32.00	\$74.67	2.33
76926	ECHO EXAM OF HEAD & TRUNK	2	3	0	3	\$132.33	\$44.11	\$44.11	1.00
76999	ECHO EXAMINATION PROCEDURE	2	4	0	4	\$436.80	\$109.20	\$109.20	1.00
77262	RADIATION THERAPY PLANNING	2	2	0	3	\$530.90	\$176.97	\$265.45	1.50
77290	SET RADIATION THERAPY FIELD	2	3	0	3	\$391.60	\$130.53	\$130.53	1.00
77336	RADIATION PHYSICS CONSULT	2	2	0	2	\$211.50	\$105.75	\$105.75	1.00
77400	DAILY RADIATION THERAPY	2	3	0	9	\$528.00	\$58.67	\$176.00	3.00
77410	DAILY RADIATION THERAPY	2	2	0	2	\$125.20	\$62.60	\$62.60	1.00
77430	WEEKLY RADIATION THERAPY	2	4	0	5	\$1,466.00	\$293.20	\$366.50	1.25
78193	NUCLEAR EXAM, WBC SCAN	2	3	0	4	\$349.00	\$87.25	\$116.33	1.33
78215	NUCLEAR SCAN, LIVER & SPLEEN	2	2	0	2	\$144.55	\$72.28	\$72.28	1.00
78223	NUCLEAR SCAN, BILIARY TRACT	2	2	0	2	\$134.20	\$67.10	\$67.10	1.00
78264	NUCLEAR EXAM, STOMACH	2	2	0	2	\$164.60	\$82.30	\$82.30	1.00
78435	NUCLEAR SCAN OF HEART FLOW	2	2	0	2	\$171.00	\$85.50	\$85.50	1.00
78474	NUCLEAR SCAN, HEART MUSCLE	2	2	0	2	\$317.25	\$158.63	\$158.63	1.00
78593	NUCLEAR SCAN OF LUNG	2	2	0	2	\$150.00	\$75.00	\$75.00	1.00
78802	NUCLEAR EXAM OF LESIONS	2	2	0	2	\$340.00	\$170.00	\$170.00	1.00
78806	NUCLEAR EXAM OF ABSCESS	2	2	0	2	\$165.02	\$82.51	\$82.51	1.00
80004	4 CLINICAL CHEMISTRY TESTS	2	3	0	3	\$29.00	\$9.67	\$9.67	1.00
80059	HEPATITIS PANEL	2	2	0	4	\$237.30	\$59.33	\$118.65	2.00
82040	ASSAY SERUM ALBUMIN	2	10	0	11	\$152.25	\$13.84	\$15.23	1.10
82250	ASSAY BLOOD BILIRUBIN	2	2	0	2	\$19.08	\$9.54	\$9.54	1.00
82270	TEST FECES FOR BLOOD	2	2	0	3	\$1.83	\$2.75	\$2.75	1.50
82728	ASSAY FERRITIN	2	3	0	3	\$87.22	\$29.07	\$29.07	1.00
84132	ASSAY BLOOD POTASSIUM	2	2	0	8	\$53.81	\$6.73	\$26.91	4.00
84165	ASSAY SERUM PROTEINS	2	3	0	3	\$16.06	\$5.35	\$5.35	1.00
84175	ASSAY BODY PROTEINS	2	8	0	8	\$99.20	\$12.40	\$12.40	1.00
84295	ASSAY BLOOD SODIUM	2	2	0	2	\$35.41	\$17.71	\$17.71	1.00
85014	HEMATOCRIT	2	2	0	2	\$11.15	\$5.58	\$5.58	1.00
85560	WBC PEROXIDASE STAIN	2	4	0	4	\$69.60	\$17.40	\$17.40	1.00
85590	PLATELET PHASE MICROSCOPY	2	3	0	3	\$19.12	\$6.37	\$6.37	1.00
85999	HEMATOLOGY PROCEDURE	2	2	0	2	\$244.09	\$122.05	\$122.05	1.00
86008	ANTIBODY, QUANT., FIRST	2	2	0	2	\$73.10	\$36.55	\$36.55	1.00
86016	RBC ANTIBODY SCREEN	2	4	0	11	\$72.75	\$6.61	\$18.19	2.75
86031	ANTI HUMAN GLOBULIN TEST	2	2	0	2	\$7.00	\$3.50	\$3.50	1.00
86070	BLOOD COMPATIBILITY TEST	2	4	0	14	\$53.36	\$3.81	\$13.34	3.50
86077	PHYSICIAN BLOOD BANK SERVICE	2	2	0	9	\$213.00	\$23.67	\$106.50	4.50
86080	BLOOD TYPING, ABO ONLY	2	2	0	4	\$35.00	\$8.75	\$17.50	2.00
86349	LEUKOCYTE TRANSFUSION	2	5	0	11	\$856.75	\$77.89	\$171.35	2.20
86353	LYMPHOCYTE TRANSFORMATION	2	2	0	4	\$1,426.10	\$356.53	\$713.05	2.00
86821	LYMPHOCYTE CULTURE, MIXED	2	2	0	3	\$519.50	\$173.17	\$259.75	1.50

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMNT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
87060	NOSE/THROAT CULTURE, BACTERIA	2	2	0	2	\$68.00	\$34.00	\$34.00	1.00
87207	SMEAR, STAIN & INTERPRET	2	2	0	2	\$32.25	\$16.13	\$16.13	1.00
88107	MICROSCOPIC EXAM OF CELLS	2	4	0	5	\$154.80	\$30.96	\$38.70	1.25
88108	MICROSCOPIC EXAM OF CELLS	2	10	0	11	\$346.46	\$31.50	\$34.65	1.10
88161	CYTOPATHOLOGY	2	2	0	2	\$52.60	\$26.30	\$26.30	1.00
88162	CYTOPATHOLOGY, EXTENSIVE	2	2	0	2	\$93.20	\$46.60	\$46.60	1.00
88173	INTERPRETATION OF SMEAR	2	2	0	2	\$138.45	\$69.23	\$69.23	1.00
88280	CHROMOSOME KARYOTYPE STUDY	2	2	0	2	\$131.00	\$65.50	\$65.50	1.00
88314	HISTOCHEMICAL STAIN	2	2	0	2	\$162.20	\$27.03	\$54.07	2.00
88329	PATHOLOGY CONSULT IN SURGERY	2	2	0	2	\$82.88	\$41.44	\$41.44	1.00
89399	PATHOLOGY LAB PROCEDURE	2	3	0	3	\$315.00	\$105.00	\$105.00	1.00
90115	HOME VISIT, NEW, INTERMED	2	18	43	43	\$3,010.00	\$70.00	\$167.22	2.39
92012	EYE EXAM, ESTABLISHED PATIENT	2	2	2	2	\$56.25	\$28.13	\$28.13	1.00
92280	SPECIAL EYE EVALUATION	2	2	1	2	\$253.00	\$126.50	\$126.50	1.00
94375	RESPIRATORY FLOW VOLUME LOOP	2	2	2	2	\$65.85	\$32.93	\$32.93	1.00
94657	CONT. VENTILATOR MANAGEMENT	2	2	0	5	\$623.50	\$124.70	\$311.75	2.50
94700	BLOOD GAS ANALYSIS	2	2	2	2	\$102.00	\$51.00	\$51.00	1.00
99054	MEDICAL SERVICES, UNUSUAL HRS	2	4	0	6	\$172.80	\$28.80	\$43.20	1.50
99205	OFFICE/OUTPATIENT VISIT, NEW	2	2	1	1	\$181.38	\$90.69	\$90.69	1.00
99212	OFFICE/OUTPATIENT VISIT, EST	2	5	4	7	\$197.25	\$28.18	\$39.45	1.40
99242	OFFICE CONSULTATION	2	2	2	2	\$195.10	\$97.55	\$97.55	1.00
99245	OFFICE CONSULTATION	2	2	2	2	\$315.00	\$157.50	\$157.50	1.00
99253	INITIAL INPATIENT CONSULT	2	2	0	2	\$145.50	\$72.75	\$72.75	1.00
99255	INITIAL INPATIENT CONSULT	2	2	0	2	\$103.60	\$51.80	\$51.80	1.00
99261	FOLLOW-UP INPATIENT CONSULT	2	2	0	5	\$197.60	\$39.52	\$98.80	2.50
10100	DRAINAGE OF INFECTED NAIL	1	1	0	1	\$24.80	\$24.80	\$24.80	1.00
11000	SURGICAL CLEANSING OF SKIN	1	1	0	1	\$54.00	\$54.00	\$54.00	1.00
11101	BIOPSY, EACH ADDED LESION	1	1	0	2	\$52.50	\$26.25	\$52.50	2.00
11403	REMOVAL OF SKIN LESION	1	1	0	1	\$111.96	\$111.96	\$111.96	1.00
12011	REPAIR SUPERFICIAL WOUND(S)	1	1	0	1	\$100.00	\$100.00	\$100.00	1.00
17000	DESTRUCTION OF FACIAL LESION	1	1	0	1	\$37.50	\$37.50	\$37.50	1.00
17100	DESTRUCTION OF SKIN LESION	1	1	0	1	\$576.00	\$576.00	\$576.00	1.00
20200	MUSCLE BIOPSY	1	1	0	1	\$230.51	\$230.51	\$230.51	1.00
27519	REPAIR OF THIGH GROWTH PLATE	1	1	0	1	\$474.00	\$474.00	\$474.00	1.00
27603	DRAIN LOWER LEG LESION	1	1	0	1	\$288.00	\$288.00	\$288.00	1.00
30800	CAUTERIZATION INNER NOSE	1	1	0	1	\$343.20	\$343.20	\$343.20	1.00
30903	CONTROL OF NOSEBLEED	1	2	0	4	\$792.80	\$198.20	\$396.40	2.00
31020	EXPLORATION MAXILLARY SINUS	1	1	0	2	\$569.70	\$284.85	\$569.70	2.00
31225	REMOVAL OF UPPER JAW	1	1	0	1	\$938.16	\$938.16	\$938.16	1.00
31230	REMOVAL OF UPPER JAW	1	1	0	1	\$4,390.00	\$4,390.00	\$4,390.00	1.00
31250	NASAL ENDOSCOPY, DIAGNOSTIC	1	1	0	1	\$1,039.94	\$1,039.94	\$1,039.94	1.00
31575	DIAGNOSTIC LARYNGOSCOPY	1	1	0	1	\$183.75	\$183.75	\$183.75	1.00
31600	INCISION OF WINDPIPE	1	1	0	2	\$1,065.74	\$532.87	\$1,065.74	2.00
31659	BRONCHOSCOPIC PROCEDURES	1	1	0	1	\$483.10	\$483.10	\$483.10	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
32095	BIOPSY THROUGH CHEST WALL	1	1	0	1	\$984.00	\$984.00	\$984.00	1.00
32405	BIOPSY, LUNG OR MEDIASTINUM	1	1	0	1	\$181.30	\$181.30	\$181.30	1.00
32500	PARTIAL REMOVAL OF LUNG	1	1	0	1	\$1,528.30	\$1,528.30	\$1,528.30	1.00
33120	REMOVAL OF HEART LESION	1	1	0	3	\$7,009.30	\$2,336.43	\$7,009.30	3.00
34151	REMOVAL OF ARTERY CLOT	1	1	0	1	\$530.40	\$530.40	\$530.40	1.00
35286	REPAIR BLOOD VESSEL LESION	1	1	0	2	\$805.74	\$402.87	\$805.74	2.00
35800	EXPLORE NECK VESSELS	1	1	0	2	\$394.20	\$197.10	\$394.20	2.00
36400	DRAWING BLOOD	1	12	0	12	\$352.95	\$29.41	\$29.41	1.00
36405	DRAWING BLOOD	1	1	0	1	\$55.55	\$55.55	\$55.55	1.00
36425	DRAWING BLOOD	1	2	0	2	\$18.00	\$9.00	\$9.00	1.00
36488	INSERTION OF CATHETER, VEIN	1	2	0	3	\$231.88	\$77.29	\$115.94	1.50
36496	REVISE INFUSION PUMP	1	1	0	1	\$900.00	\$900.00	\$900.00	1.00
36533	INSERTION OF ACCESS PORT	1	2	0	2	\$742.60	\$371.30	\$371.30	1.00
36625	INSERTION CATHETER, ARTERY	1	1	0	1	\$28.00	\$28.00	\$28.00	1.00
36640	INSERTION CATHETER, ARTERY	1	1	0	1	\$401.70	\$401.70	\$401.70	1.00
36820	INSERTION OF CANNULA	1	2	0	8	\$730.30	\$91.29	\$365.15	4.00
38246	BIOPSY/REMOVAL, LYMPH NODE(S)	1	1	0	2	\$334.00	\$167.00	\$334.00	2.00
38510	INJECTION FOR LYMPHATIC XRAY	1	1	0	1	\$205.00	\$205.00	\$205.00	1.00
38790	VISUALIZATION OF CHEST	1	1	0	1	\$298.20	\$298.20	\$298.20	1.00
39400	BIOPSY OF MOUTH LESION	1	1	0	2	\$379.50	\$379.50	\$759.00	2.00
40808	EXCISION OF TONGUE LESION	1	1	0	1	\$49.00	\$49.00	\$49.00	1.00
41113	BIOPSY ROOF OF MOUTH	1	1	0	1	\$141.67	\$141.67	\$141.67	1.00
42100	REMOVE PALATE/LESION	1	1	0	1	\$117.60	\$117.60	\$117.60	1.00
42120	PALATE/UVULA SURGERY	1	1	0	1	\$686.00	\$686.00	\$686.00	1.00
42299	ESOPHAGUS ENDOSCOPY	1	1	0	1	\$500.00	\$500.00	\$500.00	1.00
43200	ESOPHAGUS ENDOSCOPY, BIOPSY	1	1	0	1	\$463.60	\$463.60	\$463.60	1.00
43202	UPPER GI ENDOSCOPY, EXAM	1	1	0	1	\$37.50	\$37.50	\$37.50	1.00
43234	CHANGE GASTROSTOMY TUBE	1	4	0	5	\$302.50	\$302.50	\$302.50	1.25
43760	REPAIR STOMACH OPENING	1	1	0	1	\$220.00	\$44.00	\$55.00	1.00
44140	PARTIAL REMOVAL OF COLON	1	1	0	1	\$942.40	\$942.40	\$942.40	1.00
44300	OPEN BOWEL TO SKIN	1	1	0	2	\$2,307.92	\$1,153.96	\$2,307.92	2.00
44955	APPENDECTOMY	1	1	0	2	\$1,673.00	\$836.50	\$1,673.00	2.00
45378	DIAGNOSTIC COLONOSCOPY	1	1	0	1	\$217.97	\$217.97	\$217.97	1.00
45380	COLONOSCOPY AND BIOPSY	1	1	0	1	\$415.50	\$415.50	\$415.50	1.00
49420	INSERT ABDOMINAL DRAIN	1	1	0	2	\$491.78	\$491.78	\$983.55	2.00
52310	CYSTOSCOPY AND TREATMENT	1	1	0	1	\$436.30	\$436.30	\$436.30	1.00
52315	CYSTOSCOPY AND TREATMENT	1	1	0	1	\$411.50	\$411.50	\$411.50	1.00
60540	EXPLORE ADRENAL GLAND	1	1	0	1	\$427.20	\$427.20	\$427.20	1.00
60545	EXPLORE ADRENAL GLAND	1	1	0	1	\$856.18	\$856.18	\$856.18	1.00
61020	REMOVE BRAIN CAVITY FLUID	1	1	0	1	\$1,734.00	\$1,734.00	\$1,734.00	1.00
61026	INJECTION INTO BRAIN CANAL	1	1	0	1	\$150.00	\$150.00	\$150.00	1.00
61070	BRAIN CANAL SHUNT PROCEDURE	1	3	0	2	\$31.50	\$15.75	\$31.50	2.00
61155	BRAIN CANAL SHUNT PROCEDURE	1	1	0	4	\$475.93	\$118.98	\$158.64	1.33
61155		1	1	0	1	\$2,376.00	\$2,376.00	\$2,376.00	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
61312	OPEN SKULL FOR DRAINAGE	1	1	0	1	\$581.76	\$581.76	\$581.76	1.00
62278	INJECT SPINAL ANESTHETIC	1	1	0	1	\$257.60	\$257.60	\$257.60	1.00
62279	INJECT SPINAL ANESTHETIC	1	1	0	1	\$210.00	\$210.00	\$210.00	1.00
62288	INJECTION INTO SPINAL CANAL	1	1	0	1	\$144.00	\$144.00	\$144.00	1.00
69610	REPAIR OF EARDRUM	1	1	0	1	\$106.20	\$106.20	\$106.20	1.00
70110	X-RAY EXAM OF JAW	1	1	0	1	\$19.44	\$19.44	\$19.44	1.00
70360	X-RAY EXAM OF NECK	1	2	0	3	\$62.25	\$20.75	\$31.13	1.50
70481	CONTRAST CAT SCAN OF SKULL	1	2	0	2	\$260.00	\$130.00	\$130.00	1.00
70540	MAGNETIC IMAGE, FACE, NECK(MRI)	1	1	0	1	\$260.24	\$260.24	\$260.24	1.00
71015	CHEST X-RAY	1	1	0	0	\$-0.00	.	\$-0.00	0.00
71022	CHEST X-RAY	1	1	0	1	\$25.00	\$25.00	\$25.00	1.00
71030	CHEST X-RAY	1	2	0	2	\$62.00	\$31.00	\$31.00	1.00
71041	CONTRAST X-RAY OF BRONCHI	1	1	0	1	\$97.26	\$97.26	\$97.26	1.00
72010	X-RAY EXAM OF SPINE	1	1	0	1	\$28.35	\$28.35	\$28.35	1.00
72020	X-RAY EXAM OF SPINE	1	1	0	1	\$14.50	\$14.50	\$14.50	1.00
72050	X-RAY EXAM OF NECK SPINE	1	1	0	1	\$40.40	\$40.40	\$40.40	1.00
72070	X-RAY EXAM OF THORAX SPINE	1	1	0	1	\$26.30	\$26.30	\$26.30	1.00
72128	CAT SCAN OF THORAX SPINE	1	1	0	1	\$127.00	\$127.00	\$127.00	1.00
72141	MAGNETIC IMAGE, NECK SPINE	1	1	0	1	\$153.00	\$153.00	\$153.00	1.00
72146	MAGNETIC IMAGE, CHEST SPINE	1	1	0	1	\$176.75	\$176.75	\$176.75	1.00
72148	MAGNETIC IMAGE, LUMBAR SPINE	1	1	0	1	\$153.00	\$153.00	\$153.00	1.00
72196	MAGNETIC IMAGE, PELVIS	1	1	0	1	\$250.00	\$250.00	\$250.00	1.00
72271	CONTRAST X-RAY OF SPINE	1	1	0	1	\$433.00	\$433.00	\$433.00	1.00
73030	X-RAY EXAM OF SHOULDER	1	1	0	1	\$23.20	\$23.20	\$23.20	1.00
73600	X-RAY EXAM OF ANKLE	1	1	0	1	\$17.60	\$17.60	\$17.60	1.00
73630	X-RAY EXAM OF FOOT	1	1	0	1	\$22.20	\$22.20	\$22.20	1.00
73721	MAGNETIC IMAGE, JOINT OF LEG	1	1	0	1	\$117.00	\$117.00	\$117.00	1.00
74181	MAGNETIC IMAGE, ABDOMEN(MRI)	1	3	0	3	\$1,137.50	\$379.17	\$379.17	1.00
74220	CONTRAST XRAY EXAM, ESOPHAGUS	1	1	0	1	\$30.00	\$30.00	\$30.00	1.00
74240	X-RAY EXAM UPPER GI TRACT	1	1	0	1	\$55.25	\$55.25	\$55.25	1.00
74249	CONTRAST XRAY UPPER GI TRACT	1	1	0	1	\$81.60	\$81.60	\$81.60	1.00
74400	CONTRAST X-RAY URINARY TRACT	1	1	0	1	\$17.80	\$17.80	\$17.80	1.00
74415	CONTRAST X-RAY URINARY TRACT	1	1	0	1	\$36.75	\$36.75	\$36.75	1.00
74426	CONTRAST X-RAY URINARY TRACT	1	1	0	1	\$76.50	\$76.50	\$76.50	1.00
75501	CINEMA X-RAY HEART VESSELS	1	1	0	1	\$53.50	\$53.50	\$53.50	1.00
75655	ARTERY X-RAYS, HEAD & NECK	1	1	0	1	\$244.00	\$244.00	\$244.00	1.00
75682	ARTERY X-RAYS, NECK	1	1	0	1	\$500.00	\$500.00	\$500.00	1.00
75895	X-RAYS, TRANSCATHETER THERAPY	1	1	0	1	\$742.50	\$742.50	\$742.50	1.00
75971	VASCULAR BIOPSY	1	1	0	1	\$247.50	\$247.50	\$247.50	1.00
76100	X-RAY EXAM OF BODY SECTION	1	1	0	1	\$659.90	\$659.90	\$659.90	1.00
76366	CAT SCAN FOR CYST ASPIRATION	1	1	0	1	\$159.60	\$159.60	\$159.60	1.00
77263	RADIATION THERAPY PLANNING	1	2	0	2	\$161.14	\$80.57	\$80.57	1.00
77305	RADIATION THERAPY DOSE PLAN	1	1	0	1	\$34.58	\$34.58	\$34.58	1.00
77405	DAILY RADIATION THERAPY	1	3	0	12	\$824.40	\$68.70	\$274.80	4.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)

HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
77407	RADIATION TREATMENT DELIVERY	1	1	0	1	\$97.20	\$97.20	\$97.20	1.00
77408	RADIATION TREATMENT DELIVERY	1	1	0	1	\$486.00	\$486.00	\$486.00	1.00
77415	PORT VERIFICATION FILMS	1	1	0	1	\$33.00	\$33.00	\$33.00	1.00
77417	RADIOLOGY PORT FILM(S)	1	4	0	6	\$207.20	\$34.53	\$51.80	1.50
77425	WEEKLY RADIATION THERAPY	1	1	0	1	\$250.20	\$250.20	\$250.20	1.00
78104	NUCLEAR SCAN OF BONE MARROW	1	1	0	1	\$317.86	\$317.86	\$317.86	1.00
78278	NUCLEAR SCAN, GI BLOOD LOSS	1	1	0	1	\$70.50	\$70.50	\$70.50	1.00
78305	NUCLEAR SCAN OF BONES	1	2	0	2	\$172.00	\$86.00	\$86.00	1.00
78458	NUCLEAR SCAN VEIN THROMBOSIS	1	1	0	1	\$46.70	\$46.70	\$46.70	1.00
78607	NUCLEAR SCAN OF BRAIN (3D)	1	1	0	1	\$124.80	\$124.80	\$124.80	1.00
78707	NUCLEAR SCAN OF KIDNEY	1	1	0	1	\$27.60	\$27.60	\$27.60	1.00
78725	NUCLEAR EXAM OF KIDNEY	1	3	0	3	\$90.20	\$30.07	\$30.07	1.00
78803	NUCLEAR SCAN OF TUMOR (3D)	1	1	0	1	\$225.00	\$225.00	\$225.00	1.00
78805	NUCLEAR EXAM OF ABSCESS	1	1	0	1	\$198.00	\$198.00	\$198.00	1.00
78890	AUTOMATED DATA, NUCLEAR MED	1	1	0	1	\$61.60	\$61.60	\$61.60	1.00
78999	NUCLEAR DIAGNOSTIC EXAM	1	1	0	1	\$386.30	\$386.30	\$386.30	1.00
80005	5 CLINICAL CHEMISTRY TESTS	1	1	0	2	\$28.60	\$14.30	\$28.60	2.00
80008	8 CLINICAL CHEMISTRY TESTS	1	8	0	16	\$188.00	\$11.75	\$23.50	2.00
80011	11 CLINICAL CHEMISTRY TESTS	1	1	0	1	\$21.00	\$21.00	\$21.00	1.00
80050	GENERAL HEALTH SCREEN PANEL	1	1	0	1	\$39.75	\$39.75	\$39.75	1.00
80073	RENAL PANEL	1	1	0	1	\$25.00	\$25.00	\$25.00	1.00
80090	ANTIBODY PANEL	1	1	0	1	\$53.55	\$53.55	\$53.55	1.00
80099	PANEL, NOT SPECIFIED	1	1	0	1	\$295.00	\$295.00	\$295.00	1.00
80502	LAB PATHOLOGY CONSULTATION	1	3	0	8	\$266.71	\$33.34	\$88.90	2.67
81005	URINALYSIS	1	1	0	1	\$11.50	\$11.50	\$11.50	1.00
82112	ASSAY OF AMIKACIN	1	1	0	2	\$14.00	\$7.00	\$14.00	2.00
82251	ASSAY BLOOD BILIRUBIN	1	3	0	3	\$169.38	\$56.46	\$56.46	1.00
82374	ASSAY BLOOD CARBON DIOXIDE	1	1	0	1	\$25.81	\$25.81	\$25.81	1.00
82435	ASSAY BLOOD CHLORIDES	1	1	0	1	\$25.81	\$25.81	\$25.81	1.00
82438	ASSAY SPINAL FLUID CHLORIDES	1	3	0	3	\$35.00	\$11.67	\$11.67	1.00
82465	ASSAY SERUM CHOLESTEROL	1	2	0	2	\$6.00	\$3.00	\$3.00	1.00
82486	GAS/LIQUID CHROMATOGRAPHY	1	1	0	1	\$42.19	\$42.19	\$42.19	1.00
82575	CREATININE CLEARANCE TEST	1	1	0	1	\$5.00	\$5.00	\$5.00	1.00
82607	RIA ASSAY FOR VITAMIN B-12	1	1	0	1	\$3.00	\$3.00	\$3.00	1.00
82643	RIA ASSAY FOR DIGOXIN	1	4	0	13	\$117.00	\$9.00	\$29.25	3.25
82670	RIA ASSAY OF ESTRADIOL	1	1	0	1	\$40.00	\$40.00	\$40.00	1.00
82735	ASSAY BLOOD FLUORIDE	1	1	0	1	\$12.80	\$12.80	\$12.80	1.00
82745	BLOOD FOLIC ACID BIOASSAY	1	1	0	1	\$9.75	\$9.75	\$9.75	1.00
82746	BLOOD FOLIC ACID RIA	1	1	0	1	\$3.00	\$3.00	\$3.00	1.00
82763	GALACTOSE TOLERANCE TEST	1	1	0	1	\$5.50	\$5.50	\$5.50	1.00
82785	ASSAY, GAMMAGLOBULIN E	1	1	0	1	\$46.28	\$46.28	\$46.28	1.00
82792	BLOOD OXYGEN SATURATION	1	2	0	2	\$56.00	\$28.00	\$28.00	1.00
83540	ASSAY SERUM IRON	1	1	0	1	\$5.16	\$5.16	\$5.16	1.00
83555	SERUM IRON BINDING,AUTO-TEST	1	1	0	1	\$2.79	\$2.79	\$2.79	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

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(continued)

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83750	ASSAY BLOOD MAGNESIUM	1	7	0	14	\$288.00	\$20.57	\$41.14	2.00
83755	ASSAY URINE MAGNESIUM	1	1	0	1	\$16.00	\$16.00	\$16.00	1.00
84045	ASSAY PHENYTOIN	1	2	0	3	\$21.00	\$7.00	\$10.50	1.50
84075	ASSAY ALKALINE PHOSPHATASE	1	3	0	3	\$156.56	\$52.19	\$52.19	1.00
84100	ASSAY BLOOD PHOSPHORUS	1	3	0	3	\$78.55	\$26.18	\$26.18	1.00
84133	ASSAY URINE POTASSIUM	1	1	0	1	\$13.00	\$13.00	\$13.00	1.00
84170	ASSAY SERUM A/G RATIO	1	1	0	1	\$2.50	\$2.50	\$2.50	1.00
84478	ASSAY BLOOD TRIGLYCERIDES	1	2	0	2	\$10.00	\$5.00	\$5.00	1.00
84555	ASSAY URIC ACID	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00
85029	AUTOMATED HEMOGRAM	1	5	0	6	\$27.30	\$4.55	\$5.46	1.20
85030	AUTOMATED HEMOGRAM	1	1	0	1	\$1.61	\$1.61	\$1.61	1.00
85031	MANUAL HEMOGRAM, COMPLETE CBC	1	1	0	1	\$16.00	\$16.00	\$16.00	1.00
85041	RED BLOOD CELL (RBC) COUNT	1	1	0	1	\$2.63	\$2.63	\$2.63	1.00
85048	WHITE BLOOD CELL (WBC) COUNT	1	1	0	1	\$9.00	\$9.00	\$9.00	1.00
85376	FIBRINOGEN, THROMBIN	1	1	0	1	\$44.52	\$44.52	\$44.52	1.00
85535	IRON STAIN, BLOOD CELLS	1	1	0	1	\$16.00	\$16.00	\$16.00	1.00
85538	BLOOD/BONE MARROW ESTERASE	1	2	0	2	\$90.00	\$45.00	\$45.00	1.00
85575	BLOOD PLATELET ADHESIVENESS	1	2	0	3	\$24.00	\$8.00	\$12.00	1.50
85576	BLOOD PLATELET AGGREGATION	1	1	0	1	\$40.00	\$40.00	\$40.00	1.00
85618	PROTHROMBIN-PROCONVERTIN	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00
85651	RBC SEDIMENTATION RATE	1	1	0	1	\$2.50	\$2.50	\$2.50	1.00
86006	ANTIBODY, QUALITATIVE, FIRST	1	1	0	1	\$6.00	\$6.00	\$6.00	1.00
86023	IMMUNOGLOBULIN ASSAY	1	1	0	1	\$22.65	\$22.65	\$22.65	1.00
86032	ANTI HUMAN GLOBULIN TEST	1	2	0	2	\$6.00	\$3.00	\$3.00	1.00
86033	ANTI HUMAN GLOBULIN TEST	1	2	0	2	\$58.57	\$29.28	\$29.28	1.00
86095	BLOOD TYPING, OTHER ANTIGENS	1	1	0	2	\$30.00	\$15.00	\$30.00	2.00
86100	BLOOD TYPING, RHO(D) ONLY	1	1	0	2	\$26.25	\$13.13	\$26.25	2.00
86128	COLLECT, STORAGE PT OWN BLOOD	1	5	0	5	\$130.00	\$26.00	\$26.00	1.00
86235	NUCLEAR ANTIGEN ANTIBODY	1	1	0	1	\$23.40	\$23.40	\$23.40	1.00
86255	FLUORESCENT ANTIBODY; SCREEN	1	1	0	1	\$9.41	\$9.41	\$9.41	1.00
86256	FLUORESCENT ANTIBODY; TITER	1	1	0	2	\$60.00	\$30.00	\$60.00	2.00
86289	HEPATITIS BC ANTIBODY TEST	1	1	0	1	\$32.25	\$32.25	\$32.25	1.00
86291	HEPATITIS BS ANTIBODY TEST	1	1	0	1	\$28.00	\$28.00	\$28.00	1.00
86296	HEPATITIS A ANTIBODY TEST	1	1	0	1	\$37.75	\$37.75	\$37.75	1.00
86305	HETEROPHILE ANTIBODY TITER	1	1	0	1	\$8.50	\$8.50	\$8.50	1.00
86310	HETEROPHILE ANTIBODIES	1	1	0	1	\$40.95	\$40.95	\$40.95	1.00
86312	HIV ANTIBODY DETECTION	1	1	0	1	\$49.30	\$49.30	\$49.30	1.00
86342	IRRADIATION OF BLOOD PRODUCT	1	4	0	8	\$480.00	\$60.00	\$120.00	2.00
86343	LEUKOCYTE HISTAMINE RELEASE	1	1	0	1	\$60.00	\$60.00	\$60.00	1.00
86357	LYMPHOCYTES, T&B DISTINCTION	1	1	0	1	\$104.00	\$104.00	\$104.00	1.00
86403	RAPID TEST, INFECTIOUS AGENT	1	2	0	5	\$22.00	\$4.40	\$11.00	2.50
86592	BLOOD SEROLOGY, QUALITATIVE	1	1	0	1	\$3.26	\$3.26	\$3.26	1.00
86687	HTLV I ANTIBODY DETECTION	1	1	0	1	\$5.50	\$5.50	\$5.50	1.00
86805	LYMPHOCYTOTOXICITY ASSAY	1	1	0	1	\$100.00	\$100.00	\$100.00	1.00

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(continued)

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86808	CYTOTOXIC ANTIBODY SCREENING	1	1	0	1	\$57.75	\$57.75	\$57.75	1.00
86816	HLA TYPING, DR	1	2	0	2	\$400.00	\$200.00	\$200.00	1.00
87015	SPECIMEN CONCENTRATION	1	1	0	1	\$24.00	\$24.00	\$24.00	1.00
87045	STOOL CULTURE FOR BACTERIA	1	4	0	4	\$40.00	\$10.00	\$10.00	1.00
87081	BACTERIA CULTURE SCREEN	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00
87082	CULTURE OF SPECIMEN BY KIT	1	1	0	1	\$0.89	\$0.89	\$0.89	1.00
87102	FUNGUS ISOLATION CULTURE	1	1	0	1	\$33.50	\$33.50	\$33.50	1.00
87103	BLOOD FUNGUS CULTURE	1	5	0	12	\$54.00	\$4.50	\$10.80	2.40
87106	FUNGUS IDENTIFICATION	1	4	0	12	\$108.00	\$9.00	\$27.00	3.00
87163	SPECIAL MICROBIOLOGY CULTURE	1	2	0	2	\$9.50	\$4.75	\$4.75	1.00
87177	OVA AND PARASITES SMEARS	1	1	0	1	\$4.50	\$4.50	\$4.50	1.00
87181	ANTIBIOTIC SENSITIVITY, EACH	1	3	0	7	\$31.50	\$4.50	\$10.50	2.33
87184	ANTIBIOTIC SENSITIVITY, EACH	1	3	0	3	\$28.80	\$9.60	\$9.60	1.00
87206	SMEAR, STAIN & INTERPRET	1	2	0	2	\$18.00	\$9.00	\$9.00	1.00
87208	SMEAR, STAIN & INTERPRET	1	1	0	1	\$3.50	\$3.50	\$3.50	1.00
87210	SMEAR, STAIN & INTERPRET	1	1	0	1	\$8.00	\$8.00	\$8.00	1.00
88140	SEX CHROMATIN IDENTIFICATION	1	1	0	1	\$30.00	\$30.00	\$30.00	1.00
88150	CYTOPATHOLOGY, PAP SMEAR	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00
88151	CYTOPATHOLOGY INTERPRETATION	1	1	0	1	\$10.20	\$10.20	\$10.20	1.00
88170	FINE NEEDLE ASPIRATION	1	1	0	1	\$78.90	\$78.90	\$78.90	1.00
88199	CYTOPATHOLOGY PROCEDURE	1	1	0	1	\$57.19	\$57.19	\$57.19	1.00
88261	CHROMOSOME ANALYSIS: 5 CELLS	1	1	0	1	\$112.50	\$112.50	\$112.50	1.00
88285	CHROMOSOME COUNT: ADDITIONAL	1	1	0	1	\$18.00	\$18.00	\$18.00	1.00
88299	CYTOGENETIC STUDY	1	2	0	2	\$142.50	\$71.25	\$71.25	1.00
88318	CHEMICAL HISTOCHEMISTRY	1	1	0	6	\$51.00	\$8.50	\$51.00	6.00
88323	MICROSLIDE CONSULTATION	1	1	0	1	\$47.00	\$47.00	\$47.00	1.00
90000	OFFICE/OP VISIT, NEW, BRIEF	1	1	1	1	\$30.00	\$30.00	\$30.00	1.00
90010	OFFICE/OP VISIT, NEW, LTD	1	1	1	1	\$39.68	\$39.68	\$39.68	1.00
90017	OFFICE/OP VISIT, NEW, EXTEND	1	1	1	1	\$50.00	\$50.00	\$50.00	1.00
90160	HOME VISIT, INTERMED	1	15	29	29	\$2,291.00	\$79.00	\$152.73	1.93
90350	CARE FACILITY VISIT, LIMITED	1	1	7	7	\$352.00	\$50.29	\$352.00	7.00
90510	EMERGENCY CARE, NEW, LIMITED	1	1	1	1	\$48.40	\$48.40	\$48.40	1.00
90540	EMERGENCY CARE, BRIEF	1	1	1	1	\$37.60	\$37.60	\$37.60	1.00
90550	EMERGENCY CARE, LIMITED	1	1	1	1	\$20.00	\$20.00	\$20.00	1.00
90570	EMERGENCY CARE, EXTENDED	1	1	1	1	\$38.40	\$38.40	\$38.40	1.00
90580	EMERGENCY CARE, COMPREHENSIVE	1	1	1	1	\$107.30	\$107.30	\$107.30	1.00
90737	INFLUENZA B IMMUNIZATION	1	1	1	1	\$18.75	\$18.75	\$18.75	1.00
90801	PSYCHIATRIC INTERVIEW	1	1	0	1	\$160.00	\$160.00	\$160.00	1.00
90830	PSYCHOLOGICAL TESTING	1	1	2	2	\$175.00	\$87.50	\$175.00	2.00
90843	PSYCHOTHERAPY, 20-30 MIN	1	2	0	2	\$130.00	\$65.00	\$65.00	1.00
90899	PSYCHIATRIC SERVICE/THERAPY	1	1	10	10	\$225.00	\$22.50	\$225.00	10.00
90935	HEMODIALYSIS, ONE EVALUATION	1	1	0	4	\$296.40	\$74.10	\$296.40	4.00
92002	EYE EXAM, NEW PATIENT	1	1	1	1	\$42.96	\$42.96	\$42.96	1.00
92004	EYE EXAM, NEW PATIENT	1	1	1	1	\$75.00	\$75.00	\$75.00	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
92014	EYE EXAM, ESTABLISHED PATIENT	1	1	1	1	\$67.00	\$67.00	\$67.00	1.00
92060	SPECIAL EYE EVALUATION	1	1	1	1	\$16.00	\$16.00	\$16.00	1.00
92083	VISUAL FIELD EXAMINATION(S)	1	1	2	2	\$75.00	\$37.50	\$75.00	2.00
92499	EYE SERVICE OR PROCEDURE	1	1	1	2	\$13.60	\$6.80	\$13.60	2.00
92507	SPEECH/HEARING THERAPY	1	7	25	25	\$2,801.00	\$112.04	\$400.14	3.57
92543	CALORIC VESTIBULAR TEST	1	1	0	1	\$52.50	\$52.50	\$52.50	1.00
92544	OPTOKINETIC NYSTAGMUS TEST	1	1	0	1	\$30.30	\$30.30	\$30.30	1.00
92552	PURE TONE AUDIOMETRY, AIR	1	1	1	1	\$18.50	\$18.50	\$18.50	1.00
92566	IMPEDANCE HEARING TEST	1	1	1	1	\$30.00	\$30.00	\$30.00	1.00
93005	ELECTROCARDIOGRAM, TRACING	1	1	1	1	\$35.00	\$35.00	\$35.00	1.00
93015	CARDIOVASCULAR STRESS TEST	1	1	1	1	\$32.00	\$32.00	\$32.00	1.00
93501	RIGHT HEART CATHETERIZATION	1	1	0	1	\$750.00	\$750.00	\$750.00	1.00
93503	INSERT/PLACE HEART CATHETER	1	1	0	1	\$310.00	\$310.00	\$310.00	1.00
93720	TOTAL BODY PLETHYSMOGRAPHY	1	1	1	1	\$117.33	\$117.33	\$117.33	1.00
94260	THORACIC GAS VOLUME	1	1	1	1	\$20.00	\$20.00	\$20.00	1.00
94656	INITIAL VENTILATOR MANAGEMENT	1	1	0	1	\$75.00	\$75.00	\$75.00	1.00
94681	EXHALED AIR ANALYSIS: O2, CO2	1	1	1	1	\$80.00	\$80.00	\$80.00	1.00
94750	PULMONARY COMPLIANCE STUDY	1	1	1	1	\$39.64	\$39.64	\$39.64	1.00
94761	MEASURE BLOOD OXYGEN LEVEL	1	1	1	1	\$50.00	\$50.00	\$50.00	1.00
94770	EXHALED CARBON DIOXIDE TEST	1	1	1	1	\$17.60	\$17.60	\$17.60	1.00
94799	PULMONARY SERVICE/PROCEDURE	1	1	1	1	\$262.90	\$262.90	\$262.90	1.00
95105	ALLERGY PATIENT COUNSELING	1	1	1	1	\$1.02	\$1.02	\$1.02	1.00
95115	IMMUNOTHERAPY, ONE INJECTION	1	1	1	1	\$8.00	\$8.00	\$8.00	1.00
95829	SURGERY ELECTROCARDIOGRAM	1	1	0	1	\$31.88	\$31.88	\$31.88	1.00
95950	AMBULATORY EEG MONITORING	1	1	0	3	\$294.34	\$98.11	\$294.34	3.00
96425	CHEMOTHERAPY, INFUSION METHOD	1	4	3	4	\$541.60	\$135.40	\$135.40	1.00
97010	HOT OR COLD PACKS THERAPY	1	1	1	1	\$79.00	\$79.00	\$79.00	1.00
97039	PHYSICAL THERAPY TREATMENT	1	1	1	1	\$40.00	\$40.00	\$40.00	1.00
97110	THERAPEUTIC EXERCISES 30 MIN	1	1	4	4	\$164.80	\$41.20	\$164.80	4.00
97116	GAIT TRAINING THERAPY	1	1	1	1	\$40.00	\$40.00	\$40.00	1.00
97145	EXTENDED PHYSIOTHERAPY	1	3	3	3	\$96.54	\$32.18	\$32.18	1.00
97540	TRAINING FOR DAILY LIVING	1	6	0	18	\$2,307.00	\$128.17	\$384.50	3.00
99064	EMERGENCY CARE SERVICES	1	1	0	1	\$88.00	\$88.00	\$88.00	1.00
99150	PROLONGED MD ATTENDANCE	1	2	0	3	\$375.00	\$125.00	\$187.50	1.50
99151	PROLONGED MD ATTENDANCE	1	2	0	4	\$510.00	\$127.50	\$255.00	2.00
99201	OFFICE/OUTPATIENT VISIT, NEW	1	1	0	1	\$125.98	\$125.98	\$125.98	1.00
99204	OFFICE/OUTPATIENT VISIT, NEW	1	1	1	1	\$191.00	\$191.00	\$191.00	1.00
99243	OFFICE CONSULTATION	1	1	1	1	\$103.00	\$103.00	\$103.00	1.00
99251	INITIAL INPATIENT CONSULT	1	1	0	1	\$66.00	\$66.00	\$66.00	1.00
99263	FOLLOW-UP INPATIENT CONSULT	1	1	1	1	\$50.40	\$50.40	\$50.40	1.00
99272	CONFIRMATORY CONSULTATION	1	1	1	1	\$67.13	\$67.13	\$67.13	1.00
99282	EMERGENCY DEPT VISIT	1	1	1	1	\$52.20	\$52.20	\$52.20	1.00
99285	EMERGENCY DEPT VISIT	1	1	1	1	\$123.53	\$123.53	\$123.53	1.00
99352	HOME VISIT, ESTAB PATIENT	1	5	20	20	\$1,602.00	\$80.10	\$320.40	4.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMNT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
99499	UNLISTED E/M SERVICE	1	19	63	63	\$7,159.00	\$113.63	\$376.79	3.32
TYPE			7,241	2,767	21,102	\$1,666,557.37			

----- BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV -----

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99070	SPECIAL SUPPLIES	89	732	0	5,834	\$552,180.05	\$94.65	\$754.34	7.97
84999	CLINICAL CHEMISTRY TEST	87	617	0	3,240	\$320,882.25	\$99.04	\$520.07	5.25
90060	OFFICE/OP VISIT, EST, INTERM	60	304	338	338	\$10,715.27	\$31.70	\$35.25	1.11
76499	RADIOGRAPHIC PROCEDURE	52	151	0	247	\$44,940.95	\$181.95	\$297.62	1.64
90015	OFFICE/OP VISIT, NEW, INTERM	51	182	166	284	\$51,704.29	\$182.06	\$284.09	1.56
71020	CHEST X-RAY	48	179	0	240	\$7,302.66	\$30.43	\$40.80	1.34
90050	OFFICE/OP VISIT, EST, LTD	46	203	229	230	\$5,745.19	\$24.98	\$28.30	1.13
85095	BONE MARROW ASPIRATION	44	76	0	77	\$5,114.93	\$66.43	\$67.30	1.01
90070	OFFICE/OP VISIT, EST, EXTEND	32	132	138	141	\$5,827.05	\$41.33	\$44.14	1.07
88313	SPECIAL STAINS	29	47	0	77	\$1,589.98	\$20.65	\$33.83	1.64
90030	OFFICE/OP VISIT, EST, MINIM	28	109	180	180	\$1,885.87	\$10.48	\$17.30	1.65
90782	INJECTION (SC)/(IM)	27	107	481	494	\$14,935.14	\$30.21	\$139.47	4.62
96410	CHEMOTHERAPY, INFUSION METHOD	27	137	171	215	\$9,035.71	\$42.03	\$65.95	1.57
86317	IMMUNOASSAY, INFECTIOUS AGENT	25	53	0	91	\$1,414.72	\$15.55	\$26.69	1.72
36430	BLOOD TRANSFUSION SERVICE	24	61	0	94	\$3,624.40	\$38.56	\$59.42	1.54
99199	SPECIAL SERVICE OR REPORT	24	66	0	558	\$17,525.48	\$31.41	\$265.54	8.45
90080	OFFICE/OP VISIT, EST, COMPRH	23	51	55	51	\$3,736.19	\$73.26	\$73.26	1.00
90515	EMERGENCY CARE, NEW, INTERMED	23	40	47	58	\$4,033.82	\$69.55	\$100.85	1.45
36415	DRAWING BLOOD	22	74	0	91	\$548.55	\$6.03	\$7.41	1.23
85097	BONE MARROW INTERPRETATION	21	38	0	39	\$2,409.06	\$61.77	\$63.40	1.03
85100	BONE MARROW EXAMINATION	20	34	0	39	\$4,490.25	\$115.13	\$132.07	1.15
85102	BONE MARROW BIOPSY	20	29	0	35	\$2,704.19	\$77.26	\$93.25	1.21
90040	OFFICE/OP VISIT, EST, BRIEF	20	71	87	88	\$1,938.21	\$22.03	\$27.30	1.24
85023	AUTOMATED HEMOGRAM	19	81	0	106	\$2,224.92	\$20.99	\$27.47	1.31
90020	OFFICE/OP VISIT, NEW, COMPRH	19	22	23	23	\$1,873.74	\$81.47	\$85.17	1.05
94010	BREATHING CAPACITY TEST	19	23	23	23	\$632.49	\$27.50	\$27.50	1.00
86817	HLA TYPING, DR	18	29	0	91	\$28,370.89	\$311.77	\$978.31	3.14
99213	OFFICE/OUTPATIENT VISIT, EST	18	90	85	101	\$3,749.71	\$37.13	\$41.66	1.12
81000	URINALYSIS WITH MICROSCOPY	17	33	0	36	\$346.29	\$9.62	\$10.49	1.09
90620	COMPREHENSIVE CONSULTATION	17	23	20	25	\$2,363.94	\$94.56	\$102.78	1.09
85022	AUTOMATED HEMOGRAM	16	92	0	99	\$1,324.98	\$13.38	\$14.40	1.08
85103	BONE MARROW BIOPSY & EXAM	16	24	0	26	\$1,422.72	\$54.72	\$59.28	1.08
85105	BONE MARROW, INTERPRETATION	16	25	0	26	\$1,540.22	\$59.24	\$61.61	1.04

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMI_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMNT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
86813	HLA TYPING, A, B, AND/OR C	16	25	0	72	\$8,811.41	\$122.38	\$352.46	2.88
88304	TISSUE EXAM BY PATHOLOGIST	16	22	0	26	\$1,355.35	\$52.13	\$61.61	1.18
93307	ECHO EXAM OF HEART	16	17	16	18	\$2,538.50	\$141.03	\$149.32	1.06
96450	CHEMOTHERAPY, INTO CNS	16	47	46	50	\$4,033.85	\$80.68	\$85.83	1.06
80019	19 OR MORE BLOOD/URINE TESTS	15	46	0	91	\$2,341.40	\$25.73	\$50.90	1.98
83735	ASSAY BLOOD MAGNESIUM	15	50	0	57	\$1,161.18	\$20.37	\$23.22	1.14
85060	BLOOD SMEAR INTERPRETATION	15	27	0	40	\$721.62	\$18.04	\$26.73	1.48
87250	VIRUS INOCULATION FOR TEST	15	35	0	66	\$2,973.16	\$45.05	\$84.95	1.89
94240	RESIDUAL LUNG CAPACITY	15	19	19	19	\$490.99	\$25.84	\$25.84	1.00
94720	MONOXIDE DIFFUSING CAPACITY	15	20	20	20	\$675.88	\$33.79	\$33.79	1.00
96545	PROVIDE CHEMOTHERAPY AGENT	15	78	253	253	\$27,530.96	\$108.82	\$352.96	3.24
71010	CHEST X-RAY	14	18	0	24	\$563.63	\$23.48	\$31.31	1.33
90630	COMPLEX CONSULTATION	14	15	11	16	\$2,148.71	\$134.29	\$143.25	1.07
90780	IV INFUSION THERAPY, 1 HOUR	14	34	104	106	\$20,044.64	\$189.10	\$589.55	3.12
96408	CHEMOTHERAPY, PUSH TECHNIQUE	14	51	50	53	\$2,006.83	\$37.86	\$39.35	1.04
96412	CHEMOTHERAPY, INFUSION METHOD	14	47	99	101	\$4,402.92	\$43.59	\$93.68	2.15
11100	BIOPSY OF SKIN LESION	13	14	0	15	\$860.84	\$57.39	\$61.49	1.07
85007	DIFFERENTIAL WBC COUNT	13	84	0	95	\$605.91	\$6.38	\$7.21	1.13
85595	ELECTRONIC PLATELET COUNT	13	114	0	137	\$1,725.07	\$12.59	\$15.13	1.20
88305	TISSUE EXAM BY PATHOLOGIST	13	19	0	21	\$1,595.94	\$76.00	\$84.00	1.11
90784	INJECTION (IV)	13	34	106	109	\$9,463.46	\$86.82	\$278.34	3.21
94200	LUNG FUNCTION TEST (MBC/MVV)	13	17	17	17	\$320.50	\$18.85	\$18.85	1.00
96549	CHEMOTHERAPY, UNSPECIFIED	13	41	112	115	\$6,318.74	\$54.95	\$154.12	2.80
85025	AUTOMATED HEMOGRAM	12	78	0	88	\$1,370.70	\$15.58	\$17.57	1.13
90605	INTERMEDIATE CONSULTATION	12	13	12	13	\$701.88	\$53.99	\$53.99	1.00
90640	BRIEF FOLLOW-UP CONSULT	12	29	29	30	\$645.87	\$21.53	\$22.27	1.03
90641	LIMITED FOLLOW-UP CONSULT	12	31	32	32	\$964.79	\$30.15	\$31.12	1.03
90642	INTERMEDIATE FOLLOWUP CONSULT	12	23	25	26	\$1,192.15	\$45.85	\$51.83	1.13
74160	CONTRAST CAT SCAN OF ABDOMEN	11	20	0	25	\$5,215.54	\$208.62	\$260.78	1.25
88104	MICROSCOPIC EXAM OF CELLS	11	24	0	26	\$647.83	\$24.92	\$26.99	1.08
88321	MICROSLIDE CONSULTATION	11	14	0	21	\$1,405.15	\$66.91	\$100.37	1.50
90600	LIMITED CONSULTATION	11	13	12	13	\$568.86	\$43.76	\$43.76	1.00
93010	ELECTROCARDIOGRAM REPORT	11	14	10	18	\$369.24	\$20.51	\$26.37	1.29
93320	DOPPLER ECHO EXAM, HEART	11	11	10	12	\$1,469.23	\$122.44	\$133.57	1.09
99000	SPECIMEN HANDLING	11	39	0	50	\$379.16	\$7.58	\$9.72	1.28
99160	CRITICAL CARE, EACH HOUR	11	15	3	17	\$6,852.62	\$403.10	\$456.84	1.13
99214	OFFICE/OUTPATIENT VISIT, EST	11	40	39	42	\$2,109.41	\$50.22	\$52.74	1.05
20220	BONE BIOPSY, TROCER/NEEDLE	10	17	0	21	\$1,994.48	\$94.98	\$117.32	1.24
70220	X-RAY EXAM OF SINUSES	10	10	0	10	\$371.45	\$37.14	\$37.14	1.00
80018	17-18 BLOOD/URINE TESTS	10	69	0	90	\$2,398.02	\$26.64	\$34.75	1.30
85027	AUTOMATED HEMOGRAM	10	45	0	48	\$813.10	\$16.94	\$18.07	1.07
85044	RETICULOCYTE COUNT	10	42	0	44	\$727.41	\$16.53	\$17.32	1.05
86999	IMMUNOLOGY PROCEDURE	10	17	0	33	\$9,778.62	\$296.32	\$575.21	1.94
87040	BLOOD CULTURE FOR BACTERIA	10	13	0	15	\$479.73	\$31.98	\$36.90	1.15

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

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90220	HOSPITAL CARE, NEW, COMPREH	10	17	0	17	\$1,350.42	\$79.44	\$79.44	1.00
36491	INSERTION OF CATHETER, VEIN	9	11	0	24	\$4,384.20	\$182.68	\$398.56	2.18
62270	SPINAL FLUID TAP, DIAGNOSTIC	9	26	0	26	\$2,551.73	\$98.14	\$98.14	1.00
80012	12 CLINICAL CHEMISTRY TESTS	9	14	0	15	\$302.79	\$20.19	\$21.63	1.07
80016	13-16 BLOOD/URINE TESTS	9	49	0	58	\$1,535.14	\$26.47	\$31.33	1.18
80031	DRUG MONITORING, ONE DRUG	9	20	0	27	\$1,705.17	\$63.15	\$85.26	1.35
86080	BLOOD TYPING, ABO ONLY	9	11	0	17	\$198.37	\$11.67	\$18.03	1.55
88262	CHROMOSOME COUNT:15-20 CELLS	9	9	0	9	\$2,800.29	\$311.14	\$311.14	1.00
88346	IMMUNOFLUORESCENT STUDY	9	20	0	35	\$922.98	\$26.37	\$46.15	1.75
90215	HOSPITAL CARE, NEW, INTERMED	9	10	0	10	\$881.83	\$88.18	\$88.18	1.00
90643	COMPLEX FOLLOW-UP CONSULT	9	9	9	9	\$502.52	\$55.84	\$55.84	1.00
99212	OFFICE/OUTPATIENT VISIT, EST	9	14	11	11	\$305.26	\$27.75	\$21.80	0.79
99215	OFFICE/OUTPATIENT VISIT, EST	9	22	22	23	\$1,698.15	\$73.83	\$77.19	1.05
71260	CONTRAST CAT SCAN OF CHEST	8	14	0	15	\$2,472.86	\$164.86	\$176.63	1.07
82977	ASSAY OF GGT ENZYME	8	14	0	14	\$178.59	\$12.76	\$12.76	1.00
85021	AUTOMATED HEMOGRAM	8	67	0	72	\$1,218.28	\$16.92	\$18.18	1.07
86068	BLOOD COMPATIBILITY TEST	8	17	0	34	\$595.19	\$17.51	\$35.01	2.00
86287	HEPATITIS HAA, RIA, OR EIA	8	11	0	12	\$294.35	\$24.53	\$26.76	1.09
86805	LYMPHOCYTOTOXICITY ASSAY	8	10	0	38	\$2,508.43	\$66.01	\$250.84	3.80
86821	LYMPHOCYTE CULTURE, MIXED	8	11	0	23	\$3,927.40	\$170.76	\$357.04	2.09
90270	HOSPITAL VISIT, EXTENDED	8	28	1	87	\$4,645.53	\$53.40	\$165.91	3.11
99173	CRITICAL CARE, FOLLOW-UP	8	9	0	15	\$4,038.76	\$269.25	\$448.75	1.67
71250	CAT SCAN OF CHEST	7	7	0	8	\$1,980.19	\$247.52	\$282.88	1.14
85610	PROTHROMBIN TIME	7	15	0	15	\$146.18	\$9.75	\$9.75	1.00
86171	COMPLEMENT FIXATION, EACH	7	10	0	13	\$906.49	\$69.73	\$90.65	1.30
86256	FLUORESCENT ANTIBODY; TITER	7	9	0	11	\$632.64	\$57.51	\$70.29	1.22
88180	CELL MARKER STUDY	7	8	0	65	\$1,731.90	\$26.64	\$216.49	8.13
90240	HOSPITAL VISIT, BRIEF	7	12	0	45	\$1,423.77	\$31.64	\$118.65	3.75
90292	HOSPITAL DISCHARGE DAY	7	12	0	13	\$541.09	\$41.62	\$45.09	1.08
90781	IV INFUSION, ADDITIONAL HOUR	7	12	21	21	\$510.64	\$24.32	\$42.55	1.75
90844	PSYCHOTHERAPY, 45-50 MIN	7	30	64	64	\$4,135.00	\$64.61	\$137.83	2.13
96520	PUMP REFILLING, MAINTENANCE	7	30	39	40	\$1,277.11	\$31.93	\$42.57	1.33
96530	PUMP REFILLING, MAINTENANCE	7	28	29	29	\$1,499.07	\$51.69	\$53.54	1.04
70355	PANORAMIC X-RAY OF JAWS	6	6	0	6	\$125.22	\$20.87	\$20.87	1.00
72193	CONTRAST CAT SCAN OF PELVIS	6	6	0	7	\$1,527.49	\$218.21	\$254.58	1.17
78306	NUCLEAR SCAN OF SKELETON	6	14	0	15	\$1,301.32	\$86.75	\$92.95	1.07
78999	NUCLEAR DIAGNOSTIC EXAM	6	7	0	8	\$3,076.10	\$384.51	\$439.44	1.14
80059	HEPATITIS PANEL	6	6	0	8	\$448.20	\$56.03	\$74.70	1.33
80500	LAB PATHOLOGY CONSULTATION	6	10	0	14	\$335.84	\$23.99	\$33.58	1.40
85024	AUTOMATED HEMOGRAM	6	50	0	60	\$1,055.30	\$17.59	\$21.11	1.20
85580	BLOOD PLATELET COUNT	6	20	0	30	\$224.28	\$7.48	\$11.21	1.50
85730	THROMBOPLASTIN TIME, PARTIAL	6	13	0	15	\$197.94	\$13.20	\$15.23	1.15
86291	HEPATITIS BS ANTIBODY TEST	6	6	0	7	\$166.12	\$23.73	\$27.69	1.17
86329	IMMUNODIFFUSION, EACH	6	7	0	10	\$664.43	\$66.44	\$94.92	1.43

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV

(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT SERV PER SERV	SVC TO EPISODE RATIO
87070	CULTURE SPECIMEN, BACTERIA	6	12	0	12	\$224.52	\$18.71	\$18.71	1.00
88237	TISSUE CULTURE, BONE MARROW	6	7	0	7	\$2,010.34	\$287.19	\$287.19	1.00
89051	BODY FLUID CELL COUNT	6	18	0	18	\$227.06	\$12.61	\$12.61	1.00
90260	HOSPITAL VISIT, INTERMEDIATE	6	20	0	49	\$1,234.96	\$25.20	\$61.75	2.45
90610	EXTENDED CONSULTATION	6	10	9	10	\$381.98	\$38.20	\$38.20	1.00
94060	EVALUATION OF WHEEZING	6	6	6	6	\$228.58	\$38.10	\$38.10	1.00
99211	OFFICE/OUTPATIENT VISIT, EST	6	41	93	96	\$1,196.10	\$12.46	\$29.17	2.34
36299	VESSEL INJECTION PROCEDURE	5	7	0	16	\$1,253.60	\$78.35	\$179.09	2.29
36600	WITHDRAWAL OF ARTERIAL BLOOD	5	7	0	7	\$126.57	\$18.08	\$18.08	1.00
38230	BONE MARROW COLLECTION	5	5	0	14	\$4,856.99	\$346.93	\$971.40	2.80
82947	ASSAY BODY FLUID, GLUCOSE	5	15	0	16	\$135.37	\$8.46	\$9.02	1.07
84450	UV-ASSAY TRANSAMINASE (SGOT)	5	11	0	11	\$248.02	\$22.55	\$22.55	1.00
84460	UV-ASSAY TRANSAMINASE (SGPT)	5	13	0	13	\$115.11	\$8.85	\$8.85	1.00
85014	HEMATOCRIT	5	6	0	6	\$27.99	\$4.67	\$4.67	1.00
85109	BONE MARROW PREPARATION	5	9	0	9	\$205.91	\$22.88	\$22.88	1.00
86006	ANTIBODY, QUALITATIVE, FIRST	5	6	0	7	\$94.01	\$13.43	\$15.67	1.17
86083	BLOOD TYPING; ANTIBODY SCREEN	5	8	0	9	\$108.24	\$12.03	\$13.53	1.13
86095	BLOOD TYPING, OTHER ANTIGENS	5	6	0	12	\$231.00	\$19.25	\$38.50	2.00
86289	HEPATITIS BC ANTIBODY TEST	5	5	0	5	\$116.76	\$23.35	\$23.35	1.00
86296	HEPATITIS A ANTIBODY TEST	5	5	0	6	\$161.74	\$26.96	\$32.35	1.20
86430	RHEUMATOID FACTOR TEST	5	6	0	6	\$94.12	\$15.69	\$15.69	1.00
87205	SMEAR, STAIN & INTERPRET	5	11	0	16	\$150.81	\$9.43	\$13.71	1.45
90530	EMERGENCY CARE, MINIMAL	5	11	33	33	\$525.50	\$15.92	\$47.77	3.00
90560	EMERGENCY CARE, INTERMEDIATE	5	9	12	12	\$403.86	\$33.66	\$44.87	1.33
93325	DOPPLER COLOR FLOW	5	6	7	6	\$287.58	\$47.93	\$47.93	1.00
94799	PULMONARY SERVICE/PROCEDURE	5	8	8	8	\$1,684.41	\$210.55	\$210.55	1.00
36490	INSERTION OF CATHETER, VEIN	4	4	0	5	\$1,331.60	\$266.32	\$332.90	1.25
36497	REMOVE INFUSION PUMP	4	4	0	4	\$862.25	\$215.56	\$215.56	1.00
37799	VASCULAR SURGERY PROCEDURE	4	5	0	5	\$1,065.32	\$213.06	\$213.06	1.00
43235	UPPER GI ENDOSCOPY, DIAGNOSIS	4	4	0	7	\$988.66	\$141.24	\$247.17	1.75
70210	X-RAY EXAM OF SINUSES	4	5	0	5	\$121.00	\$24.20	\$24.20	1.00
70551	MAGNETIC IMAGE, BRAIN (MRI)	4	4	0	5	\$3,563.44	\$712.69	\$890.86	1.25
74000	X-RAY EXAM OF ABDOMEN	4	4	0	5	\$137.31	\$27.46	\$34.33	1.25
74150	CAT SCAN OF ABDOMEN	4	4	0	6	\$1,902.12	\$317.02	\$475.53	1.50
76100	X-RAY EXAM OF BODY SECTION	4	5	0	7	\$3,183.55	\$454.79	\$636.71	1.40
76700	ECHO EXAM OF ABDOMEN	4	4	0	4	\$399.91	\$99.98	\$99.98	1.00
77290	SET RADIATION THERAPY FIELD	4	5	0	5	\$1,335.25	\$267.05	\$267.05	1.00
78471	NUCLEAR SCAN, HEART MUSCLE	4	4	0	4	\$358.80	\$89.70	\$89.70	1.00
80004	4 CLINICAL CHEMISTRY TESTS	4	7	0	7	\$62.01	\$8.86	\$8.86	1.00
81002	URINALYSIS WITHOUT SCOPE	4	4	0	4	\$48.08	\$12.02	\$12.02	1.00
82150	ASSAY OF SERUM AMYLASE	4	21	0	21	\$268.85	\$12.80	\$12.80	1.00
82525	ASSAY BLOOD COPPER	4	4	0	4	\$187.25	\$46.81	\$46.81	1.00
84630	ASSAY BLOOD ZINC	4	4	0	4	\$250.75	\$62.69	\$62.69	1.00
86008	ANTIBODY, QUANT., FIRST	4	5	0	6	\$114.21	\$19.03	\$22.84	1.20

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
86021	WBC ANTIBODY IDENTIFICATION	4	4	0	5	\$347.30	\$69.46	\$86.83	1.25
88307	TISSUE EXAM BY PATHOLOGIST	4	6	0	6	\$893.79	\$148.97	\$148.97	1.00
88311	DECALCIFY TISSUE	4	6	0	6	\$126.48	\$21.08	\$21.08	1.00
90000	OFFICE/OP VISIT, NEW, BRIEF	4	4	4	4	\$57.65	\$14.41	\$14.41	1.00
90010	OFFICE/OP VISIT, NEW, LTD	4	4	4	4	\$112.29	\$28.07	\$28.07	1.00
90250	HOSPITAL VISIT, LIMITED	4	8	0	28	\$375.11	\$13.40	\$46.89	3.50
90540	EMERGENCY CARE, BRIEF	4	5	5	5	\$123.98	\$24.80	\$24.80	1.00
90550	EMERGENCY CARE, LIMITED	4	4	5	5	\$157.50	\$31.50	\$39.38	1.25
90580	EMERGENCY CARE, COMPREHENSIVE	4	4	4	4	\$295.91	\$73.98	\$73.98	1.00
90699	GENERAL MEDICAL SERVICE	4	4	4	4	\$697.45	\$174.36	\$174.36	1.00
93000	ELECTROCARDIOGRAM, COMPLETE	4	4	6	6	\$219.15	\$36.53	\$54.79	1.50
93799	CARDIOVASCULAR PROCEDURE	4	6	4	6	\$371.10	\$61.85	\$61.85	1.00
96400	CHEMOTHERAPY, (SC)/(IM)	4	13	13	14	\$519.80	\$37.13	\$39.98	1.08
96414	PHYSICAL MEDICINE PROCEDURE	4	10	10	13	\$581.45	\$44.73	\$58.15	1.30
97799	SUBSEQUENT HOSPITAL CARE	4	4	7	7	\$489.88	\$69.98	\$122.47	1.75
99232	OFFICE CONSULTATION	4	6	0	9	\$286.47	\$31.83	\$47.75	1.50
99245	PLACE NEEDLE IN VEIN	4	4	4	4	\$527.54	\$131.89	\$131.89	1.00
36000	BIOPSY OF LIP	3	9	0	9	\$390.66	\$43.41	\$43.41	1.00
40490	CAT SCAN OF HEAD OR BRAIN	3	3	0	3	\$132.00	\$44.00	\$44.00	1.00
70450	CONTRAST CAT SCAN OF SKULL	3	3	0	4	\$610.42	\$152.61	\$203.47	1.33
70481	CAT SCAN OF FACE, JAW	3	3	0	3	\$324.63	\$108.21	\$108.21	1.00
70486	X-RAYS, BONE SURVEY	3	3	0	3	\$587.50	\$195.83	\$195.83	1.00
76062	RADIATION THERAPY PLANNING	3	5	0	5	\$414.35	\$82.87	\$82.87	1.00
77263	RADIATION THERAPY DOSE PLAN	3	4	0	4	\$1,208.28	\$302.07	\$302.07	1.00
77300	RADIATION THERAPY DOSE PLAN	3	5	0	5	\$350.08	\$70.02	\$70.02	1.00
77315	RADIATION THERAPY DOSE PLAN	3	4	0	4	\$472.96	\$118.24	\$118.24	1.00
77334	RADIATION THERAPY AID(S)	3	4	0	4	\$686.82	\$171.71	\$171.71	1.00
77336	RADIATION PHYSICS CONSULT	3	7	0	8	\$464.20	\$58.03	\$66.31	1.14
80007	7 CLINICAL CHEMISTRY TESTS	3	4	0	4	\$1,271.22	\$317.81	\$317.81	1.00
82040	ASSAY SERUM ALBUMIN	3	4	0	4	\$53.16	\$13.29	\$13.29	1.00
82251	ASSAY BLOOD BILIRUBIN	3	3	0	3	\$117.62	\$39.21	\$39.21	1.00
82728	ASSAY FERRITIN	3	3	0	3	\$52.89	\$17.63	\$17.63	1.00
82784	ASSAY GAMMAGLOBULIN A/D/G/M	3	3	0	12	\$143.09	\$11.92	\$47.70	4.00
82785	ASSAY, GAMMAGLOBULIN E	3	4	0	4	\$170.72	\$42.68	\$42.68	1.00
83615	UV-ASSAY BLOOD LDH ENZYME	3	4	0	4	\$44.16	\$11.04	\$11.04	1.00
84195	ASSAY SPINAL FLUID PROTEIN	3	6	0	7	\$118.56	\$16.94	\$19.76	1.17
84555	ASSAY URIC ACID	3	4	0	4	\$44.98	\$11.25	\$11.25	1.00
85999	HEMATOLOGY PROCEDURE	3	3	0	3	\$102.64	\$34.21	\$34.21	1.00
86032	ANTI HUMAN GLOBULIN TEST	3	7	0	7	\$50.43	\$7.20	\$7.20	1.00
86082	BLOOD TYPING, ABO & RHO(D)	3	8	0	15	\$52.50	\$3.50	\$6.56	1.88
87072	CULTURE OF SPECIMEN BY KIT	3	4	0	6	\$116.80	\$19.47	\$29.20	1.50
87086	URINE CULTURE, COLONY COUNT	3	3	0	3	\$23.20	\$7.73	\$7.73	1.00
89050	BODY FLUID CELL COUNT	3	10	0	10	\$140.46	\$14.05	\$14.05	1.00
90505	EMERGENCY CARE, NEW, BRIEF	3	3	3	3	\$102.80	\$34.27	\$34.27	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
94375	RESPIRATORY FLOW VOLUME LOOP	3	4	4	4	\$133.40	\$33.35	\$33.35	1.00
94700	BLOOD GAS ANALYSIS	3	3	2	3	\$90.12	\$30.04	\$30.04	1.00
97110	THERAPEUTIC EXERCISES 30 MIN	3	7	18	19	\$2,811.34	\$147.97	\$401.62	2.71
98902	CONFERENCE WITH PHYSICIAN	3	3	1	3	\$225.10	\$75.03	\$75.03	1.00
99231	SUBSEQUENT HOSPITAL CARE	3	9	0	37	\$1,891.90	\$51.13	\$210.21	4.11
99238	HOSPITAL DISCHARGE DAY	3	3	0	3	\$190.83	\$63.61	\$63.61	1.00
99499	UNLISTED E/M SERVICE	3	15	24	24	\$3,423.60	\$142.65	\$228.24	1.60
10061	DRAINAGE OF SKIN ABSCESS	2	2	0	2	\$149.20	\$74.60	\$74.60	1.00
17100	DESTRUCTION OF SKIN LESION	2	2	0	2	\$64.26	\$32.13	\$32.13	1.00
20225	BONE BIOPSY, TROCAR/NEEDLE	2	2	0	2	\$421.10	\$210.55	\$210.55	1.00
20240	BONE BIOPSY, EXCISIONAL	2	2	0	9	\$368.75	\$40.97	\$184.38	4.50
36410	DRAINAGE OF GUM LESION	2	7	0	7	\$118.18	\$16.88	\$16.88	1.00
36488	INSERTION OF CATHETER, VEIN	2	2	0	7	\$571.65	\$81.66	\$285.82	3.50
36489	INSERTION OF CATHETER, VEIN	2	2	0	3	\$724.35	\$362.18	\$362.18	1.50
38240	BONE MARROW TRANSPLANTATION	2	2	0	0	\$-424.84	\$-212.42	\$-212.42	0.00
38250	BIOPSY/REMOVAL, LYMPH NODE(S)	2	2	0	2	\$381.33	\$190.67	\$190.67	1.00
38255	BIOPSY/REMOVAL, LYMPH NODE(S)	2	2	0	3	\$532.81	\$177.60	\$266.41	1.50
41800	DRAINAGE OF GUM LESION	2	2	0	2	\$123.00	\$61.50	\$61.50	1.00
70250	X-RAY EXAM OF SKULL	2	2	0	2	\$90.02	\$45.01	\$45.01	1.00
70470	CONTRAST CAT SCANS OF HEAD	2	2	0	2	\$871.50	\$435.75	\$435.75	1.00
70491	CONTRAST CAT OF NECK TISSUE	2	2	0	3	\$426.90	\$142.30	\$142.30	1.00
71030	CHEST X-RAY	2	2	0	2	\$49.95	\$24.98	\$24.98	1.00
72170	X-RAY EXAM OF PELVIS	2	2	0	2	\$38.20	\$19.10	\$19.10	1.00
72192	CAT SCAN OF PELVIS	2	3	0	4	\$527.51	\$131.88	\$175.84	1.33
73610	X-RAY EXAM OF ANKLE	2	2	0	3	\$60.35	\$20.12	\$30.17	1.50
74010	X-RAY EXAM OF ABDOMEN	2	4	0	4	\$190.42	\$47.61	\$47.61	1.00
74020	X-RAY EXAM OF ABDOMEN	2	2	0	2	\$53.75	\$26.88	\$26.88	1.00
74170	CONTRAST CAT SCANS, ABDOMEN	2	2	0	2	\$676.80	\$338.40	\$338.40	1.00
76000	FLUOROSCOPE EXAMINATION	2	2	0	2	\$61.40	\$30.70	\$30.70	1.00
76140	X-RAY CONSULTATION	2	2	0	2	\$172.81	\$86.41	\$86.41	1.00
77321	RADIATION THERAPY PORT PLAN	2	2	0	3	\$373.20	\$124.40	\$186.60	1.50
77333	RADIATION TREATMENT AID(S)	2	2	0	3	\$358.80	\$119.60	\$179.40	1.50
78725	NUCLEAR EXAM OF KIDNEY	2	3	0	3	\$58.11	\$19.37	\$19.37	1.00
80006	6 CLINICAL CHEMISTRY TESTS	2	2	0	2	\$24.00	\$12.00	\$12.00	1.00
80073	RENAL PANEL	2	2	0	2	\$53.98	\$26.99	\$26.99	1.00
80502	LAB PATHOLOGY CONSULTATION	2	2	0	5	\$154.36	\$30.87	\$77.18	2.50
82250	ASSAY BLOOD BILIRUBIN	2	4	0	4	\$25.55	\$6.39	\$6.39	1.00
82310	ASSAY CALCIUM IN BLOOD	2	2	0	2	\$45.16	\$22.58	\$22.58	1.00
82565	ASSAY BLOOD CREATININE	2	3	0	3	\$43.20	\$14.40	\$14.40	1.00
83750	ASSAY BLOOD MAGNESIUM	2	4	0	4	\$93.84	\$23.46	\$23.46	1.00
83912	GENETIC EXAMINATION	2	2	0	2	\$127.13	\$63.57	\$63.57	1.00
84075	ASSAY ALKALINE PHOSPHATASE	2	2	0	2	\$141.05	\$70.53	\$70.53	1.00
84100	ASSAY BLOOD PHOSPHORUS	2	2	0	2	\$46.17	\$23.08	\$23.08	1.00
84132	ASSAY BLOOD POTASSIUM	2	10	0	13	\$144.00	\$11.08	\$14.40	1.30

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
84175	ASSAY BODY PROTEINS	2	10	0	10	\$118.90	\$11.89	\$11.89	1.00
84231	RADIOIMMUNOASSAY	2	23	0	30	\$2,301.18	\$76.71	\$100.05	1.30
85029	AUTOMATED HEMOGRAM	2	10	0	17	\$71.94	\$4.23	\$7.19	1.70
85535	IRON STAIN, BLOOD CELLS	2	3	0	3	\$40.83	\$13.61	\$13.61	1.00
85575	BLOOD PLATELET ADHESIVENESS	2	5	0	8	\$81.05	\$10.13	\$16.21	1.60
85590	PLATELET PHASE MICROSCOPY	2	14	0	15	\$88.37	\$5.89	\$6.31	1.07
85651	RBC SEDIMENTATION RATE	2	2	0	2	\$25.20	\$12.60	\$12.60	1.00
86016	RBC ANTIBODY SCREEN	2	14	0	19	\$235.43	\$12.39	\$16.82	1.36
86312	HIV ANTIBODY DETECTION	2	2	0	2	\$24.15	\$12.08	\$12.08	1.00
86580	TB INTRADERMAL TEST	2	2	0	2	\$29.00	\$14.50	\$14.50	1.00
86593	BLOOD SEROLOGY, QUANTITATIVE	2	3	0	7	\$81.22	\$11.60	\$27.07	2.33
86812	HLA TYPING, A, B, OR C	2	3	0	5	\$1,566.54	\$313.31	\$522.18	1.67
86816	HLA TYPING, DR	2	3	0	4	\$469.70	\$117.43	\$156.57	1.33
87081	BACTERIA CULTURE SCREEN	2	2	0	3	\$56.00	\$18.67	\$28.00	1.50
87101	SKIN FUNGUS CULTURE	2	2	0	2	\$24.04	\$12.02	\$12.02	1.00
87186	ANTIBIOTIC SENSITIVITY, MIC	2	3	0	3	\$58.22	\$19.41	\$19.41	1.00
87252	VIRUS INOCULATION FOR TEST	2	2	0	3	\$35.25	\$11.75	\$17.63	1.50
88106	MICROSCOPIC EXAM OF CELLS	2	4	0	3	\$133.70	\$44.57	\$33.43	0.75
88108	MICROSCOPIC EXAM OF CELLS	2	5	0	5	\$170.30	\$34.06	\$34.06	1.00
88150	CYTOPATHOLOGY, PAP SMEAR	2	2	0	2	\$25.00	\$12.50	\$12.50	1.00
88160	CYTOPATHOLOGY	2	6	0	6	\$145.00	\$24.17	\$24.17	1.00
88261	CHROMOSOME ANALYSIS: 5 CELLS	2	2	0	2	\$262.50	\$131.25	\$131.25	1.00
88312	SPECIAL STAINS	2	2	0	2	\$30.79	\$15.40	\$15.40	1.00
88347	IMMUNOFLUORESCENT STUDY	2	4	0	5	\$188.20	\$37.64	\$47.05	1.25
89190	NASAL SMEAR FOR EOSINOPHILS	2	2	0	2	\$23.25	\$11.63	\$11.63	1.00
90017	OFFICE/OP VISIT, NEW, EXTEND	2	2	2	2	\$114.16	\$57.08	\$57.08	1.00
90340	CARE FACILITY VISIT, BRIEF	2	2	0	9	\$261.60	\$29.07	\$130.80	4.50
90517	EMERGENCY CARE, NEW, EXTEND	2	2	2	2	\$115.97	\$57.99	\$57.99	1.00
90520	EMERGENCY CARE, NEW, COMPREH	2	2	2	2	\$155.19	\$77.60	\$77.60	1.00
90653	2ND OR 3RD OPINION	2	2	2	2	\$284.06	\$142.03	\$142.03	1.00
92002	EYE EXAM, NEW PATIENT	2	2	2	2	\$75.00	\$37.50	\$37.50	1.00
93005	ELECTROCARDIOGRAM, TRACING	2	2	2	2	\$65.40	\$32.70	\$32.70	1.00
93308	ECHO EXAM OF HEART	2	2	1	2	\$132.00	\$66.00	\$66.00	1.00
94160	VITAL CAPACITY SCREENING	2	3	3	3	\$94.14	\$31.38	\$31.38	1.00
96422	CHEMOTHERAPY, INFUSION METHOD	2	6	7	7	\$506.90	\$84.48	\$84.48	1.17
97145	EXTENDED PHYSIOTHERAPY	2	3	10	10	\$664.50	\$66.45	\$221.50	3.33
99082	CONFERENCE WITH PHYSICIAN	2	2	0	2	\$77.50	\$38.75	\$38.75	1.00
99203	UNUSUAL PHYSICIAN TRAVEL	2	2	0	3	\$69.14	\$23.05	\$34.57	1.50
99233	OFFICE/OUTPATIENT VISIT, NEW	2	2	1	2	\$139.03	\$69.52	\$69.52	1.00
99244	SUBSEQUENT HOSPITAL CARE	2	2	0	2	\$248.60	\$124.30	\$124.30	1.00
99251	OFFICE CONSULTATION	2	2	2	2	\$89.84	\$89.84	\$89.84	1.00
99254	INITIAL INPATIENT CONSULT	2	2	1	2	\$113.70	\$56.85	\$56.85	1.00
99262	FOLLOW-UP INPATIENT CONSULT	2	2	0	2	\$183.26	\$91.63	\$91.63	1.00
		2	5	5	5	\$197.00	\$39.40	\$39.40	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
10120	REMOVE FOREIGN BODY	1	1	0	1	\$72.80	\$72.80	\$72.80	1.00
11101	BIOPSY, EACH ADDED LESION	1	1	0	1	\$23.33	\$23.33	\$23.33	1.00
11404	REMOVAL OF SKIN LESION	1	1	0	1	\$213.45	\$213.45	\$213.45	1.00
11901	ADDED SKIN LESION INJECTIONS	1	1	0	1	\$4.63	\$4.63	\$4.63	1.00
17000	DESTRUCTION OF FACIAL LESION	1	1	0	1	\$46.00	\$46.00	\$46.00	1.00
17101	DESTRUCTION OF 2ND LESION	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00
20200	MUSCLE BIOPSY	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
26105	BIOPSY FINGER JOINT LINING	1	1	0	1	\$645.00	\$645.00	\$645.00	1.00
29580	APPLICATION OF PASTE BOOT	1	1	0	1	\$12.75	\$12.75	\$12.75	1.00
31575	DIAGNOSTIC LARYNGOSCOPY	1	2	0	2	\$292.05	\$146.03	\$146.03	1.00
36400	DRAWING BLOOD	1	10	0	11	\$357.95	\$32.54	\$35.80	1.10
36425	DRAWING BLOOD	1	4	0	4	\$32.40	\$8.10	\$8.10	1.00
36455	EXCHANGE TRANSFUSION SERVICE	1	3	0	9	\$552.50	\$61.39	\$184.17	3.00
36495	IMPLANT INFUSION PUMP	1	1	0	1	\$570.00	\$570.00	\$570.00	1.00
36533	INSERTION OF ACCESS PORT	1	1	0	1	\$409.30	\$409.30	\$409.30	1.00
36620	INSERTION CATHETER, ARTERY	1	2	0	3	\$0.00	\$0.00	\$0.00	1.50
36640	INSERTION CATHETER, ARTERY	1	1	0	1	\$388.57	\$388.57	\$388.57	1.00
36800	INSERTION OF CANNULA	1	1	0	1	\$32.76	\$32.76	\$32.76	1.00
38241	BONE MARROW TRANSPLANTATION	1	1	0	1	\$920.00	\$920.00	\$920.00	1.00
38246		1	1	0	1	\$2,750.00	\$2,750.00	\$2,750.00	1.00
38260		1	1	0	8	\$2,481.00	\$310.13	\$2,481.00	8.00
38265		1	1	0	1	\$38.63	\$38.63	\$38.63	1.00
38550	REMOVAL NECK/ARMPIT LESION	1	1	0	1	\$195.17	\$195.17	\$195.17	1.00
38999	BLOOD/LYMPH SYSTEM PROCEDURE	1	1	0	1	\$1,609.00	\$1,609.00	\$1,609.00	1.00
42806	BIOPSY OF UPPER NOSE/THROAT	1	1	0	1	\$84.37	\$84.37	\$84.37	1.00
43239	UPPER GI ENDOSCOPY, BIOPSY	1	1	0	1	\$412.10	\$412.10	\$412.10	1.00
43300	PROCTOSIGMOIDOSCOPY	1	1	0	1	\$48.75	\$48.75	\$48.75	1.00
45331	SIGMOIDOSCOPY AND BIOPSY	1	1	0	1	\$70.85	\$70.85	\$70.85	1.00
45378	DIAGNOSTIC COLONOSCOPY	1	1	0	1	\$198.08	\$198.08	\$198.08	1.00
49301	PERITONEOSCOPY WITH BIOPSY	1	1	0	1	\$70.87	\$70.87	\$70.87	1.00
52281	CYSTOSCOPY AND TREATMENT	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
52310	CYSTOSCOPY AND TREATMENT	1	1	0	1	\$251.40	\$251.40	\$251.40	1.00
57452	EXAMINATION OF VAGINA	1	1	0	1	\$114.75	\$114.75	\$114.75	1.00
61020	REMOVE BRAIN CAVITY FLUID	1	2	0	2	\$300.00	\$150.00	\$150.00	1.00
61026	INJECTION INTO BRAIN CANAL	1	1	0	2	\$23.80	\$11.90	\$23.80	2.00
62269	NEEDLE BIOPSY SPINAL CORD	1	1	0	1	\$328.79	\$328.79	\$328.79	1.00
62279	INJECT SPINAL ANESTHETIC	1	1	0	1	\$297.50	\$297.50	\$297.50	1.00
62282	TREAT SPINAL CANAL LESION	1	1	0	1	\$467.50	\$467.50	\$467.50	1.00
62284	INJECTION FOR MYELOGRAM	1	1	0	2	\$30.08	\$15.04	\$30.08	2.00
62287	PERCUTANEOUS DISCECTOMY	1	1	0	1	\$125.70	\$125.70	\$125.70	1.00
64999	NERVOUS SYSTEM SURGERY	1	1	0	11	\$900.00	\$81.82	\$900.00	11.00
68825	EXPLORE TEAR DUCT SYSTEM	1	1	0	1	\$359.44	\$359.44	\$359.44	1.00
70460	CONTRAST CAT SCAN OF HEAD	1	1	0	1	\$135.50	\$135.50	\$135.50	1.00
70487	CONTRAST CAT SCAN, FACE/JAW	1	1	0	1	\$138.75	\$138.75	\$138.75	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV -----									
(continued)									
PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
70552	MAGNETIC IMAGE, BRAIN (MRI)	1	1	0	1	\$392.40	\$392.40	\$392.40	1.00
72070	X-RAY EXAM OF THORAX SPINE	1	1	0	1	\$22.00	\$22.00	\$22.00	1.00
72100	X-RAY EXAM OF LOWER SPINE	1	1	0	1	\$25.00	\$25.00	\$25.00	1.00
72126	CONTRAST CAT SCAN OF NECK	1	1	0	1	\$611.00	\$611.00	\$611.00	1.00
72141	MAGNETIC IMAGE, NECK SPINE	1	1	0	1	\$707.00	\$707.00	\$707.00	1.00
72146	MAGNETIC IMAGE, CHEST SPINE	1	1	0	1	\$677.00	\$677.00	\$677.00	1.00
72148	MAGNETIC IMAGE, LUMBAR SPINE	1	1	0	1	\$677.00	\$677.00	\$677.00	1.00
73000	X-RAY EXAM OF COLLARBONE	1	1	0	1	\$22.00	\$22.00	\$22.00	1.00
73030	X-RAY EXAM OF SHOULDER	1	1	0	1	\$21.20	\$21.20	\$21.20	1.00
73130	X-RAY EXAM OF HAND	1	1	0	2	\$33.92	\$16.96	\$33.92	2.00
73510	X-RAY EXAM OF HIP	1	1	0	1	\$23.00	\$23.00	\$23.00	1.00
73550	X-RAY EXAM OF THIGH	1	1	0	1	\$11.60	\$11.60	\$11.60	1.00
73560	X-RAY EXAM OF KNEE	1	1	0	2	\$50.50	\$25.25	\$50.50	2.00
73620	X-RAY EXAM OF FOOT	1	1	0	1	\$12.90	\$12.90	\$12.90	1.00
74181	MAGNETIC IMAGE, ABDOMEN(MRI)	1	3	0	3	\$1,950.00	\$650.00	\$650.00	1.00
74246	CONTRAST XRAY UPPER GI TRACT	1	1	0	1	\$61.50	\$61.50	\$61.50	1.00
76061	X-RAYS, BONE SURVEY	1	1	0	1	\$31.89	\$31.89	\$31.89	1.00
76080	X-RAY EXAM OF FISTULA	1	1	0	1	\$41.00	\$41.00	\$41.00	1.00
76091	MAMMOGRAM, BOTH BREASTS	1	1	0	1	\$33.00	\$33.00	\$33.00	1.00
76370	CAT SCAN FOR THERAPY GUIDE	1	1	0	6	\$300.00	\$50.00	\$300.00	6.00
76375	CAT SCANS, OTHER PLANES	1	1	0	1	\$28.00	\$28.00	\$28.00	1.00
76775	ECHO EXAM ABDOMEN BACK WALL	1	1	0	1	\$99.00	\$99.00	\$99.00	1.00
76932	ECHO GUIDE FOR HEART BIOPSY	1	1	0	1	\$310.66	\$310.66	\$310.66	1.00
77262	RADIATION THERAPY PLANNING	1	1	0	1	\$88.49	\$88.49	\$88.49	1.00
77285	SET RADIATION THERAPY FIELD	1	1	0	1	\$149.97	\$149.97	\$149.97	1.00
77310	RADIATION THERAPY DOSE PLAN	1	1	0	1	\$121.30	\$121.30	\$121.30	1.00
77331	SPECIAL RADIATION DOSIMETRY	1	1	0	1	\$93.00	\$93.00	\$93.00	1.00
77332	RADIATION TREATMENT AID(S)	1	1	0	2	\$63.60	\$31.80	\$63.60	2.00
77400	DAILY RADIATION THERAPY	1	1	0	3	\$83.25	\$27.75	\$83.25	3.00
77410	DAILY RADIATION THERAPY	1	5	0	25	\$1,625.00	\$65.00	\$325.00	5.00
77415	PORT VERIFICATION FILMS	1	1	0	1	\$20.00	\$20.00	\$20.00	1.00
77420	WEEKLY RADIATION THERAPY	1	2	0	2	\$277.50	\$138.75	\$138.75	1.00
77430	WEEKLY RADIATION THERAPY	1	1	0	1	\$617.00	\$617.00	\$617.00	1.00
77470	SPECIAL RADIATION TREATMENT	1	1	0	1	\$166.60	\$166.60	\$166.60	1.00
77499	RADIATION THERAPY MANAGEMENT	1	12	0	12	\$133.76	\$11.15	\$11.15	1.00
78075	NUCLEAR SCAN OF ADRENALS	1	1	0	1	\$66.40	\$66.40	\$66.40	1.00
78215	NUCLEAR SCAN, LIVER & SPLEEN	1	1	0	1	\$80.80	\$80.80	\$80.80	1.00
78472	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$117.72	\$117.72	\$117.72	1.00
78473	NUCLEAR SCAN, CARDIAC MUGA	1	1	0	1	\$317.00	\$317.00	\$317.00	1.00
78475	NUCLEAR SCAN, HEART MUSCLE	1	2	0	2	\$270.00	\$135.00	\$135.00	1.00
78476	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$141.00	\$141.00	\$141.00	1.00
78477	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$77.40	\$77.40	\$77.40	1.00
78799	GENITOURINARY NUCLEAR EXAM	1	1	0	1	\$84.30	\$84.30	\$84.30	1.00
78800	NUCLEAR EXAM OF LESION	1	1	0	1	\$18.10	\$18.10	\$18.10	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
78802	NUCLEAR EXAM OF LESIONS	1	1	0	2	\$190.50	\$95.25	\$190.50	2.00
78803	NUCLEAR SCAN OF TUMOR (3D)	1	1	0	1	\$204.75	\$204.75	\$204.75	1.00
78990	PROVIDE RADIOISOTOPE(S)	1	1	0	1	\$167.13	\$167.13	\$167.13	1.00
80002	1-2 CLINICAL CHEM TESTS	1	1	0	2	\$12.50	\$6.25	\$12.50	2.00
80008	8 CLINICAL CHEMISTRY TESTS	1	2	0	2	\$40.00	\$20.00	\$20.00	1.00
80011	11 CLINICAL CHEMISTRY TESTS	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00
80030	GENERAL HEALTH SCREEN PANEL	1	1	0	2	\$79.50	\$39.75	\$79.50	2.00
80058	HEPATIC FUNCTION PANEL	1	1	0	1	\$24.00	\$24.00	\$24.00	1.00
80061	LIPID PROFILE	1	1	0	1	\$43.00	\$43.00	\$43.00	1.00
80070	THYROID PANEL	1	1	0	1	\$8.50	\$8.50	\$8.50	1.00
80084	PITUITARY PANEL	1	1	0	1	\$7.50	\$7.50	\$7.50	1.00
80090	ANTIBODY PANEL	1	1	0	3	\$160.00	\$53.33	\$160.00	3.00
80099	PANEL, NOT SPECIFIED	1	1	0	1	\$58.00	\$58.00	\$58.00	1.00
81005	URINALYSIS	1	1	0	1	\$0.33	\$0.33	\$0.33	1.00
82112	ASSAY OF AMIKACIN	1	1	0	1	\$38.82	\$38.82	\$38.82	1.00
82205	ASSAY OF BARBITURATES	1	1	0	1	\$34.50	\$34.50	\$34.50	1.00
82270	TEST FECES FOR BLOOD	1	1	0	1	\$5.25	\$5.25	\$5.25	1.00
82438	ASSAY SPINAL FLUID CHLORIDES	1	4	0	4	\$54.74	\$13.69	\$13.69	1.00
82465	ASSAY SERUM CHOLESTEROL	1	1	0	1	\$4.50	\$4.50	\$4.50	1.00
82607	RIA ASSAY FOR VITAMIN B-12	1	2	0	2	\$40.75	\$20.38	\$20.38	1.00
82745	BLOOD FOLIC ACID BIOASSAY	1	1	0	1	\$6.75	\$6.75	\$6.75	1.00
82746	BLOOD FOLIC ACID RIA	1	1	0	1	\$32.00	\$32.00	\$32.00	1.00
82756	FREE THYROXINE INDEX (T-7)	1	1	0	1	\$14.25	\$14.25	\$14.25	1.00
82792	BLOOD OXYGEN SATURATION	1	1	0	1	\$6.53	\$6.53	\$6.53	1.00
83001	PITUITARY GONADOTROPIN RIA	1	1	0	1	\$49.66	\$49.66	\$49.66	1.00
83002	PITUITARY GONADOTROPINS RIA	1	1	0	1	\$37.63	\$37.63	\$37.63	1.00
83010	CHEM ASSAY HAPTOGLOBIN	1	1	0	1	\$9.00	\$9.00	\$9.00	1.00
83540	ASSAY SERUM IRON	1	1	0	1	\$4.50	\$4.50	\$4.50	1.00
83545	AUTO-ASSAY SERUM IRON	1	3	0	3	\$11.07	\$3.69	\$3.69	1.00
83550	SERUM IRON BINDING TEST	1	1	0	1	\$7.50	\$7.50	\$7.50	1.00
83555	SERUM IRON BINDING, AUTO-TEST	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00
83718	BLOOD LIPOPROTEIN ASSAY	1	1	0	1	\$14.60	\$14.60	\$14.60	1.00
83720	BLOOD LIPOPROTEIN ASSAY	1	1	0	1	\$5.65	\$5.65	\$5.65	1.00
84045	ASSAY PHENYTOIN	1	2	0	2	\$32.81	\$32.81	\$32.81	1.00
84155	ASSAY SERUM PROTEIN	1	1	0	1	\$16.80	\$16.80	\$16.80	1.00
84165	ASSAY SERUM PROTEINS	1	1	0	1	\$9.00	\$9.00	\$9.00	1.00
84176	SPECIAL PROTEIN EXAMINATION	1	1	0	1	\$5.70	\$5.70	\$5.70	1.00
84275	ASSAY BLOOD SIALIC ACID	1	1	0	1	\$55.00	\$55.00	\$55.00	1.00
84295	ASSAY BLOOD SODIUM	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00
84443	ASSAY THYROID STIM HORMONE	1	1	0	1	\$21.00	\$21.00	\$21.00	1.00
84478	ASSAY BLOOD TRIGLYCERIDES	1	1	0	1	\$6.75	\$6.75	\$6.75	1.00
84703	CHORIONIC GONADOTROPIN ASSAY	1	1	0	1	\$9.38	\$9.38	\$9.38	1.00
85018	HEMOGLOBIN, COLORIMETRIC	1	2	0	2	\$7.50	\$3.75	\$3.75	1.00
85030	AUTOMATED HEMOGRAM	1	16	0	22	\$30.55	\$1.39	\$1.91	1.38

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
85048	WHITE BLOOD CELL (WBC) COUNT	1	1	0	1	\$7.35	\$7.35	\$7.35	1.00
85101	ASPIRATE, STAIN BONE MARROW	1	1	0	1	\$101.00	\$101.00	\$101.00	1.00
85230	BLOOD CLOT FACTOR VII TEST	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
85577	BLOOD PLATELET RETENTION	1	1	0	4	\$120.00	\$30.00	\$120.00	4.00
85650	RBC SEDIMENTATION RATE	1	1	0	1	\$7.20	\$7.20	\$7.20	1.00
86011	LEUKOCYTE ANTIBODY DETECTION	1	2	0	2	\$115.80	\$57.90	\$57.90	1.00
86031	ANTIHUMAN GLOBULIN TEST	1	1	0	1	\$3.75	\$3.75	\$3.75	1.00
86077	PHYSICIAN BLOOD BANK SERVICE	1	4	0	5	\$78.75	\$15.75	\$19.69	1.25
86085	BLOOD TYPING; ANTIGEN SCREEN	1	2	0	5	\$13.50	\$2.70	\$6.75	2.50
86100	BLOOD TYPING, RHO(D) ONLY	1	10	0	13	\$206.89	\$15.91	\$20.69	1.30
86105	BLOOD TYPING, RH GENOTYPING	1	1	0	1	\$3.00	\$3.00	\$3.00	1.00
86115	BLOOD TYPING, RHOGAM TYPE	1	1	0	1	\$16.00	\$16.00	\$16.00	1.00
86162	COMPLEMENT; TOTAL (CH 50)	1	1	0	1	\$55.44	\$55.44	\$55.44	1.00
86255	FLUORESCENT ANTIBODY; SCREEN	1	1	0	6	\$9.00	\$9.00	\$54.00	6.00
86290	HEPATITIS BC ANTIBODY TEST	1	1	0	1	\$18.68	\$18.68	\$18.68	1.00
86298	HEPATITIS A ANTIBODY TEST	1	1	0	2	\$16.63	\$16.63	\$33.25	2.00
86299	HEPATITIS A ANTIBODY TEST	1	1	0	1	\$16.63	\$16.63	\$16.63	1.00
86300	HETEROPHILE ANTIBODY SCREEN	1	1	0	1	\$105.60	\$105.60	\$105.60	1.00
86310	HETEROPHILE ANTIBODIES	1	1	0	1	\$21.60	\$21.60	\$21.60	1.00
86319	IMMUNOASSAY FOR DRUGS	1	1	0	2	\$24.00	\$24.00	\$24.00	2.00
86342	IRRADIATION OF BLOOD PRODUCT	1	2	0	2	\$160.00	\$80.00	\$80.00	1.00
86349	LEUKOCYTE TRANSFUSION	1	1	0	1	\$33.75	\$33.75	\$33.75	1.00
86353	LYMPHOCYTE TRANSFORMATION	1	1	0	1	\$554.25	\$554.25	\$554.25	1.00
86357	LYMPHOCYTES, T&B DISTINCTION	1	2	0	2	\$100.00	\$50.00	\$50.00	1.00
86382	NEUTRALIZATION TEST, VIRAL	1	1	0	2	\$44.00	\$22.00	\$44.00	2.00
86592	BLOOD SEROLOGY, QUALITATIVE	1	1	0	1	\$3.75	\$3.75	\$3.75	1.00
86687	HTLV I ANTIBODY DETECTION	1	4	0	4	\$45.00	\$11.25	\$11.25	1.00
87045	STOOL CULTURE FOR BACTERIA	1	2	0	2	\$136.00	\$68.00	\$68.00	1.00
87085	CULTURE OF SPECIMEN BY KIT	1	1	0	4	\$145.00	\$36.25	\$145.00	4.00
87102	FUNGUS ISOLATION CULTURE	1	1	0	1	\$16.13	\$16.13	\$16.13	1.00
87106	FUNGUS IDENTIFICATION	1	1	0	2	\$18.16	\$9.08	\$18.16	2.00
87118	MYCOBACTERIA IDENTIFICATION	1	2	0	2	\$84.00	\$42.00	\$42.00	1.00
87163	SPECIAL MICROBIOLOGY CULTURE	1	1	0	4	\$80.87	\$20.22	\$80.87	4.00
87177	OVA AND PARASITES SMEARS	1	1	0	1	\$40.00	\$40.00	\$40.00	1.00
87178	MICROBE IDENTIFICATION	1	1	0	1	\$30.40	\$30.40	\$30.40	1.00
87206	SMEAR, STAIN & INTERPRET	1	1	0	1	\$13.00	\$13.00	\$13.00	1.00
87207	SMEAR, STAIN & INTERPRET	1	1	0	1	\$1.54	\$1.54	\$1.54	1.00
87210	SMEAR, STAIN & INTERPRET	1	1	0	1	\$11.76	\$11.76	\$11.76	1.00
87299	MICROBIOLOGY PROCEDURE	1	1	0	1	\$117.29	\$117.29	\$117.29	1.00
88161	CYTOPATHOLOGY	1	1	0	1	\$30.80	\$30.80	\$30.80	1.00
88182	CELL MARKER STUDY	1	1	0	1	\$106.44	\$35.48	\$106.44	3.00
88260	CHROMOSOME ANALYSIS: 5 CELLS	1	1	0	1	\$216.00	\$216.00	\$216.00	1.00
88280	CHROMOSOME KARYOTYPE STUDY	1	1	0	1	\$90.00	\$90.00	\$90.00	1.00
88285	CHROMOSOME COUNT: ADDITIONAL	1	1	0	1	\$18.00	\$18.00	\$18.00	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPIISODE RATIO
88299	CYTOGENETIC STUDY	1	1	0	2	\$963.50	\$481.75	\$963.50	2.00
88300	TISSUE EXAM BY PATHOLOGIST	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00
88302	TISSUE EXAM BY PATHOLOGIST	1	1	0	1	\$45.45	\$45.45	\$45.45	1.00
88319	ENZYME HISTOCHEMISTRY	1	1	0	2	\$19.02	\$9.51	\$19.02	2.00
88331	PATHOLOGY CONSULT IN SURGERY	1	1	0	1	\$66.00	\$66.00	\$66.00	1.00
88342	IMMUNOCYTOCHEMISTRY	1	1	0	2	\$30.00	\$15.00	\$30.00	2.00
88348	ELECTRON MICROSCOPY	1	1	0	1	\$375.00	\$375.00	\$375.00	1.00
89399	PATHOLOGY LAB PROCEDURE	1	1	0	1	\$35.00	\$35.00	\$35.00	1.00
90100	HOME VISIT, NEW, BRIEF	1	3	3	3	\$5,975.21	\$1,991.74	\$1,991.74	1.00
90115	HOME VISIT, NEW, INTERMED	1	10	14	14	\$990.25	\$70.73	\$99.03	1.40
90130	HOME VISIT, MINIMAL	1	1	1	1	\$45.00	\$45.00	\$45.00	1.00
90160	HOME VISIT, INTERMED	1	4	4	4	\$283.00	\$70.75	\$70.75	1.00
90170	HOME VISIT, EXTENDED	1	1	1	1	\$16.40	\$16.40	\$16.40	1.00
90200	HOSPITAL CARE, NEW, BRIEF	1	2	0	2	\$116.00	\$58.00	\$58.00	1.00
90510	EMERGENCY CARE, NEW, LIMITED	1	1	1	1	\$35.00	\$35.00	\$35.00	1.00
90570	EMERGENCY CARE, EXTENDED	1	1	2	2	\$150.20	\$75.10	\$150.20	2.00
90651	2ND OR 3RD OPINION	1	1	1	1	\$37.05	\$37.05	\$37.05	1.00
90741	PASSIVE IMMUNIZATION, ISG	1	1	50	50	\$4,792.69	\$95.85	\$4,792.69	50.00
90788	INJECTION OF ANTIBIOTIC	1	1	1	1	\$9.40	\$9.40	\$9.40	1.00
90799	THERAPEUTIC/DIAG INJECTION	1	1	1	1	\$51.00	\$51.00	\$51.00	1.00
90801	PSYCHIATRIC INTERVIEW	1	1	1	1	\$21.15	\$21.15	\$21.15	1.00
90847	SPECIAL FAMILY THERAPY	1	1	4	4	\$185.40	\$46.35	\$185.40	4.00
92004	EYE EXAM, NEW PATIENT	1	1	1	1	\$16.26	\$16.26	\$16.26	1.00
92012	EYE EXAM, ESTABLISHED PATIENT	1	1	1	1	\$56.70	\$56.70	\$56.70	1.00
92014	EYE EXAM, ESTABLISHED PATIENT	1	1	1	1	\$35.00	\$35.00	\$35.00	1.00
92083	VISUAL FIELD EXAMINATION(S)	1	1	1	1	\$54.07	\$54.07	\$54.07	1.00
92511	NASOPHARYNGOSCOPY	1	1	1	1	\$36.00	\$36.00	\$36.00	1.00
92533	CALORIC VESTIBULAR TEST	1	1	1	1	\$12.32	\$12.32	\$12.32	1.00
92552	PURE TONE AUDIOMETRY, AIR	1	1	1	1	\$21.60	\$21.60	\$21.60	1.00
92553	AUDIOMETRY, AIR & BONE	1	1	1	1	\$35.40	\$35.40	\$35.40	1.00
92556	SPEECH AUDIOMETRY, COMPLETE	1	1	1	1	\$28.80	\$28.80	\$28.80	1.00
92566	IMPEDANCE HEARING TEST	1	1	1	1	\$30.00	\$30.00	\$30.00	1.00
93012	TRANSMISSION OF ECG	1	1	1	1	\$57.00	\$57.00	\$57.00	1.00
93040	RHYTHM ECG WITH REPORT	1	1	1	1	\$10.21	\$10.21	\$10.21	1.00
93042	RHYTHM ECG, REPORT	1	1	1	1	\$12.00	\$12.00	\$12.00	1.00
93950	LIMB VEIN STUDY	1	1	0	1	\$125.00	\$125.00	\$125.00	1.00
93971	EXTREMITY STUDY	1	1	1	1	\$65.44	\$65.44	\$65.44	1.00
94260	THORACIC GAS VOLUME	1	1	1	1	\$29.25	\$29.25	\$29.25	1.00
94350	LUNG NITROGEN WASHOUT CURVE	1	1	1	1	\$61.14	\$61.14	\$61.14	1.00
94620	PULMONARY STRESS TESTING	1	1	1	1	\$29.10	\$29.10	\$29.10	1.00
94760	MEASURE BLOOD OXYGEN LEVEL	1	1	1	1	\$12.00	\$12.00	\$12.00	1.00
94770	EXHALED CARBON DIOXIDE TEST	1	1	1	1	\$7.00	\$7.00	\$7.00	1.00
95117	IMMUNOTHERAPY INJECTIONS	1	1	1	3	\$30.00	\$10.00	\$30.00	3.00
95125	IMMUNOTHERAPY, MANY ANTIGENS	1	1	1	2	\$18.80	\$9.40	\$18.80	2.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=ALLOGENEIC PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPI RATIO
95155	ANTIGEN THERAPY SERVICES	1	1	1	10	\$40.00	\$4.00	\$40.00	10.00
95882	COGNITIVE FUNCTION TESTING	1	1	1	1	\$101.25	\$101.25	\$101.25	1.00
96420	CHEMOTHERAPY, PUSH TECHNIQUE	1	1	1	1	\$65.00	\$65.00	\$65.00	1.00
96425	CHEMOTHERAPY, INFUSION METHOD	1	1	1	1	\$15.00	\$15.00	\$15.00	1.00
96440	CHEMOTHERAPY, INTRACAVITARY	1	1	1	1	\$45.00	\$45.00	\$45.00	1.00
96912	PHOTOCHEMOTHERAPY WITH UV-A	1	1	1	1	\$35.00	\$35.00	\$35.00	1.00
97010	HOT OR COLD PACKS THERAPY	1	2	7	7	\$549.00	\$78.43	\$274.50	3.50
98800	98800	1	1	0	2	\$536.00	\$268.00	\$536.00	2.00
99001	SPECIMEN HANDLING	1	1	0	1	\$50.00	\$50.00	\$50.00	1.00
99065	EMERGENCY CARE SERVICES	1	1	0	1	\$85.00	\$85.00	\$85.00	1.00
99151	PROLONGED MD ATTENDANCE	1	1	0	1	\$126.25	\$126.25	\$126.25	1.00
99171	CRITICAL CARE, FOLLOW-UP	1	1	0	5	\$265.00	\$53.00	\$265.00	5.00
99174	CRITICAL CARE, FOLLOW-UP	1	1	0	2	\$170.00	\$85.00	\$170.00	2.00
99201	OFFICE/OUTPATIENT VISIT, NEW	1	1	1	0	\$2.06	.	\$2.06	0.00
99202	OFFICE/OUTPATIENT VISIT, NEW	1	1	1	1	\$56.80	\$56.80	\$56.80	1.00
99204	OFFICE/OUTPATIENT VISIT, NEW	1	1	1	1	\$71.25	\$71.25	\$71.25	1.00
99205	OFFICE/OUTPATIENT VISIT, NEW	1	1	1	1	\$97.28	\$97.28	\$97.28	1.00
99221	INITIAL HOSPITAL CARE	1	1	0	1	\$100.00	\$100.00	\$100.00	1.00
99222	INITIAL HOSPITAL CARE	1	1	0	1	\$97.90	\$97.90	\$97.90	1.00
99241	OFFICE CONSULTATION	1	1	1	1	\$46.00	\$46.00	\$46.00	1.00
99242	OFFICE CONSULTATION	1	1	1	1	\$46.56	\$46.56	\$46.56	1.00
99243	OFFICE CONSULTATION	1	1	1	1	\$34.00	\$34.00	\$34.00	1.00
99261	FOLLOW-UP INPATIENT CONSULT	1	3	3	3	\$78.00	\$26.00	\$26.00	1.00
99263	FOLLOW-UP INPATIENT CONSULT	1	1	1	1	\$50.40	\$50.40	\$50.40	1.00
99282	EMERGENCY DEPT VISIT	1	1	1	1	\$260.94	\$260.94	\$260.94	1.00
99283	EMERGENCY DEPT VISIT	1	1	1	1	\$150.14	\$150.14	\$150.14	1.00
99285	EMERGENCY DEPT VISIT	1	1	1	1	\$164.20	\$164.20	\$164.20	1.00
99292	CRITICAL CARE, ADDL 30 MIN	1	1	0	1	\$90.00	\$90.00	\$90.00	1.00
99341	HOME VISIT, NEW PATIENT	1	5	5	5	\$2,885.75	\$577.15	\$577.15	1.00
99342	HOME VISIT, NEW PATIENT	1	3	7	7	\$2,231.25	\$318.75	\$743.75	2.33
99352	HOME VISIT, ESTAB PATIENT	1	3	18	18	\$1,285.20	\$71.40	\$428.40	6.00
TYPE		7,377	3,758	18,370	\$1,454,171.31				
BMT_TYPE		22372	8,059	61,027	\$4,900,670.26				

APPENDIX D

DEPARTMENT OF DEFENSE CHAMPUS

ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS

TOTAL PATIENT TREATMENT EPISODES

PROFESSIONAL SERVICES DETAILED WORKLOAD

HOSPITAL END DATE: OCTOBER 1988-JULY 1992

BMT TYPE: AUTOLOGOUS BONE MARROW TRANSPLANTATION

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
99070	SPECIAL SUPPLIES	51	138	1	1,797	\$138,680.43	\$77.17	\$1,004.93	13.02
84999	CLINICAL CHEMISTRY TEST	49	129	0	1,002	\$88,276.37	\$88.10	\$684.31	7.77
71020	CHEST X-RAY	39	132	0	299	\$3,942.83	\$13.19	\$29.87	2.27
71010	CHEST X-RAY	36	128	0	223	\$3,404.60	\$15.27	\$26.60	1.74
76499	RADIOGRAPHIC PROCEDURE	28	37	0	79	\$23,012.82	\$291.30	\$621.97	2.14
93010	ELECTROCARDIOGRAM REPORT	28	60	8	103	\$1,662.87	\$16.14	\$27.71	1.72
90015	OFFICE/OP VISIT, NEW, INTERM	27	45	59	189	\$10,095.11	\$33.41	\$224.34	4.20
90260	HOSPITAL VISIT, INTERMEDIATE	26	80	1	290	\$12,710.67	\$43.83	\$158.88	3.63
90220	HOSPITAL CARE, NEW, COMPREH	25	36	2	42	\$4,687.19	\$111.60	\$130.20	1.17
85095	BONE MARROW ASPIRATION	22	36	0	45	\$2,859.11	\$63.54	\$79.42	1.25
90250	HOSPITAL VISIT, LIMITED	20	88	0	544	\$22,784.91	\$41.88	\$258.92	6.18
90270	HOSPITAL VISIT, EXTENDED	20	90	27	338	\$21,504.41	\$59.51	\$236.72	3.98
90620	COMPREHENSIVE CONSULTATION	20	34	5	34	\$3,119.14	\$91.74	\$91.74	1.00
88313	SPECIAL STAINS	19	34	0	62	\$984.20	\$15.87	\$28.95	1.82
90060	OFFICE/OP VISIT, EST, INTERM	19	29	42	42	\$1,129.26	\$26.89	\$38.94	1.45
85105	BONE MARROW, INTERPRETATION	18	34	0	40	\$1,686.12	\$42.15	\$49.59	1.18
90050	OFFICE/OP VISIT, EST, LTD	18	26	29	31	\$804.95	\$25.97	\$30.96	1.19
88304	TISSUE EXAM BY PATHOLOGIST	17	25	0	25	\$1,352.79	\$54.11	\$54.11	1.00
36491	INSERTION OF CATHETER, VEIN	16	18	0	33	\$9,145.73	\$277.14	\$508.10	1.83
85097	BONE MARROW INTERPRETATION	16	26	0	33	\$1,512.98	\$45.85	\$58.19	1.27
85102	BONE MARROW BIOPSY	16	29	0	37	\$3,306.95	\$89.38	\$114.03	1.28
90292	HOSPITAL DISCHARGE DAY	16	19	0	20	\$1,380.94	\$69.05	\$72.68	1.05
36430	BLOOD TRANSFUSION SERVICE	15	80	0	169	\$12,161.94	\$71.96	\$152.02	2.11
90605	INTERMEDIATE CONSULTATION	15	19	5	19	\$1,193.82	\$62.83	\$62.83	1.00
96410	CHEMOTHERAPY, INFUSION METHOD	15	43	13	112	\$6,777.09	\$60.51	\$157.61	2.60
99160	CRITICAL CARE, EACH HOUR	15	19	0	50	\$8,778.81	\$175.58	\$462.04	2.63
99173	CRITICAL CARE, FOLLOW-UP	15	35	0	225	\$16,541.36	\$73.52	\$472.61	6.43
99174	CRITICAL CARE, FOLLOW-UP	14	43	0	230	\$27,258.71	\$118.52	\$633.92	5.35
90280	HOSPITAL VISIT, COMPREHENSIVE	13	56	0	237	\$25,713.25	\$100.05	\$459.17	4.59
85100	BONE MARROW EXAMINATION	12	28	0	39	\$3,390.73	\$86.94	\$121.10	1.39
94010	BREATHING CAPACITY TEST	12	24	7	41	\$766.41	\$18.69	\$31.93	1.71
36489	INSERTION OF CATHETER, VEIN	11	13	0	18	\$3,288.51	\$182.70	\$252.96	1.38
77470	SPECIAL RADIATION TREATMENT	11	14	0	52	\$7,104.45	\$136.62	\$507.46	3.71
88104	MICROSCOPIC EXAM OF CELLS	11	24	0	35	\$1,263.14	\$36.09	\$52.63	1.46
90610	EXTENDED CONSULTATION	11	15	5	14	\$851.65	\$60.83	\$56.78	0.93
38230	BONE MARROW COLLECTION	10	10	0	12	\$9,531.48	\$794.29	\$953.15	1.20
70220	X-RAY EXAM OF SINUSES	10	14	0	14	\$392.07	\$28.00	\$28.00	1.00
71260	CONTRAST CAT SCAN OF CHEST	10	13	0	14	\$1,308.04	\$93.43	\$100.62	1.08
74150	CAT SCAN OF ABDOMEN	10	12	0	19	\$2,014.17	\$106.01	\$167.85	1.58
90641	LIMITED FOLLOW-UP CONSULT	10	14	10	28	\$1,014.87	\$36.25	\$72.49	2.00
94720	MONOXIDE DIFFUSING CAPACITY	10	10	6	10	\$236.29	\$23.63	\$23.63	1.00
99232	SUBSEQUENT HOSPITAL CARE	10	65	0	161	\$9,580.16	\$59.50	\$147.39	2.48
38241	BONE MARROW TRANSPLANTATION	9	9	0	10	\$5,411.42	\$541.14	\$601.27	1.11
74000	X-RAY EXAM OF ABDOMEN	9	15	0	15	\$263.19	\$17.55	\$17.55	1.00
77263	RADIATION THERAPY PLANNING	9	9	0	10	\$2,808.39	\$280.84	\$312.04	1.11

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
85103	BONE MARROW BIOPSY & EXAM	9	13	0	15	\$806.83	\$53.79	\$62.06	1.15
90040	OFFICE/OP VISIT, EST, BRIEF	9	10	14	14	\$314.75	\$22.48	\$31.47	1.40
93307	ECHO EXAM OF HEART	9	14	5	14	\$2,131.08	\$152.22	\$152.22	1.00
36495	IMPLANT INFUSION PUMP	8	10	0	18	\$5,425.37	\$301.41	\$542.54	1.80
38999	BLOOD/LYMPH SYSTEM PROCEDURE	8	9	0	14	\$8,022.90	\$573.06	\$891.43	1.56
62270	SPINAL FLUID TAP, DIAGNOSTIC	8	16	0	20	\$1,872.35	\$93.62	\$117.02	1.25
74160	CONTRAST CAT SCAN OF ABDOMEN	8	9	0	10	\$1,504.25	\$150.43	\$167.14	1.11
85060	BLOOD SMEAR INTERPRETATION	8	9	0	12	\$289.43	\$24.12	\$32.16	1.33
86068	BLOOD COMPATIBILITY TEST	8	14	0	26	\$550.43	\$21.17	\$39.32	1.86
88305	TISSUE EXAM BY PATHOLOGIST	8	9	0	12	\$1,162.80	\$96.90	\$129.20	1.33
90515	EMERGENCY CARE, NEW, INTERMED	8	13	8	13	\$554.93	\$42.69	\$42.69	1.00
99199	SPECIAL SERVICE OR REPORT	8	11	0	59	\$2,419.02	\$41.00	\$219.91	5.36
38265		7	7	0	10	\$9,094.61	\$909.46	\$1,299.23	1.43
74020	X-RAY EXAM OF ABDOMEN	7	8	0	11	\$352.46	\$32.04	\$44.06	1.38
76700	ECHO EXAM OF ABDOMEN	7	9	0	10	\$609.47	\$60.95	\$67.72	1.11
77331	SPECIAL RADIATION DOSIMETRY	7	7	0	8	\$365.57	\$45.70	\$52.22	1.14
77336	RADIATION PHYSICS CONSULT	7	7	0	9	\$568.15	\$63.13	\$81.16	1.29
85023	AUTOMATED HEMOGRAM	7	16	0	48	\$541.27	\$11.28	\$33.83	3.00
85595	ELECTRONIC PLATELET COUNT	7	30	0	121	\$538.19	\$4.45	\$17.94	4.03
88311	DECALCIFY TISSUE	7	9	0	9	\$196.30	\$21.81	\$21.81	1.00
88312	SPECIAL STAINS	7	12	0	24	\$536.18	\$22.34	\$44.68	2.00
90600	LIMITED CONSULTATION	7	7	3	7	\$299.95	\$42.85	\$42.85	1.00
90630	COMPLEX CONSULTATION	7	9	2	9	\$966.32	\$107.37	\$107.37	1.00
96412	CHEMOTHERAPY, INFUSION METHOD	7	19	21	84	\$2,507.12	\$29.85	\$131.95	4.42
99231	SUBSEQUENT HOSPITAL CARE	7	44	0	131	\$8,202.12	\$62.61	\$186.41	2.98
38250		6	7	0	7	\$4,053.01	\$579.00	\$579.00	1.00
72193	CONTRAST CAT SCAN OF PELVIS	6	7	0	8	\$1,136.14	\$142.02	\$162.31	1.14
74170	CONTRAST CAT SCANS, ABDOMEN	6	7	0	7	\$1,111.28	\$158.75	\$158.75	1.00
78471	NUCLEAR SCAN, HEART MUSCLE	6	6	0	6	\$554.46	\$92.41	\$92.41	1.00
80018	17-18 BLOOD/URINE TESTS	6	8	0	23	\$385.95	\$16.78	\$48.24	2.88
80500	LAB PATHOLOGY CONSULTATION	6	14	0	34	\$891.61	\$26.22	\$63.69	2.43
83735	ASSAY BLOOD MAGNESIUM	6	18	0	67	\$598.25	\$8.93	\$33.24	3.72
86082	BLOOD TYPING, ABO & RHO(D)	6	8	0	15	\$98.31	\$6.55	\$12.29	1.88
90070	OFFICE/OP VISIT, EST, EXTEND	6	8	8	8	\$391.15	\$48.89	\$48.89	1.00
90782	INJECTION (SC)/(IM)	6	13	27	27	\$692.33	\$25.64	\$53.26	2.08
99233	SUBSEQUENT HOSPITAL CARE	6	122	0	145	\$13,307.72	\$91.78	\$109.08	1.19
99238	HOSPITAL DISCHARGE DAY	6	7	0	7	\$408.70	\$58.39	\$58.39	1.00
20220	BONE BIOPSY, TROCAR/NEEDLE	5	5	0	5	\$580.30	\$116.06	\$116.06	1.00
70210	X-RAY EXAM OF SINUSES	5	6	0	6	\$99.42	\$16.57	\$16.57	1.00
70470	CONTRAST CAT SCANS OF HEAD	5	5	0	5	\$665.93	\$133.19	\$133.19	1.00
71250	CAT SCAN OF CHEST	5	12	0	12	\$1,337.33	\$111.44	\$111.44	1.00
72192	CAT SCAN OF PELVIS	5	5	0	5	\$655.94	\$131.19	\$131.19	1.00
76705	ECHO EXAM OF ABDOMEN	5	5	0	7	\$476.61	\$68.09	\$95.32	1.40
77290	SET RADIATION THERAPY FIELD	5	5	0	5	\$521.99	\$104.40	\$104.40	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMI_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
77300	RADIATION THERAPY DOSE PLAN	5	7	0	11	\$1,205.83	\$109.62	\$172.26	1.57
77334	RADIATION TREATMENT AID(S)	5	7	0	7	\$848.61	\$121.23	\$121.23	1.00
77430	WEEKLY RADIATION THERAPY	5	7	0	24	\$1,953.56	\$81.40	\$279.08	3.43
80007	7 CLINICAL CHEMISTRY TESTS	5	13	0	62	\$1,629.40	\$26.28	\$125.34	4.77
81000	URINALYSIS WITH MICROSCOPY	5	9	0	18	\$57.60	\$3.20	\$6.40	2.00
88106	MICROSCOPIC EXAM OF CELLS	5	7	0	7	\$110.64	\$15.81	\$15.81	1.00
90030	OFFICE/OP VISIT, EST, MINIM	5	9	58	58	\$239.93	\$4.14	\$26.66	6.44
90080	OFFICE/OP VISIT, EST, COMPRH	5	5	5	5	\$338.60	\$67.72	\$67.72	1.00
90642	INTERMEDIAT FOLLOWUP CONSULT	5	6	0	7	\$382.75	\$54.68	\$63.79	1.17
90643	COMPLEX FOLLOW-UP CONSULT	5	7	6	11	\$528.70	\$48.06	\$75.53	1.57
90780	IV INFUSION THERAPY, 1 HOUR	5	10	34	47	\$10,551.95	\$224.51	\$1,055.20	4.70
90844	PSYCHOTHERAPY, 45-50 MIN	5	12	12	28	\$1,962.90	\$70.10	\$163.58	2.33
93320	DOPPLER ECHO EXAM, HEART	5	6	3	6	\$512.00	\$85.33	\$85.33	1.00
94240	RESIDUAL LUNG CAPACITY	5	5	3	5	\$107.39	\$21.48	\$21.48	1.00
94700	BLOOD GAS ANALYSIS	5	5	3	5	\$69.75	\$13.95	\$13.95	1.00
99223	INITIAL HOSPITAL CARE	5	5	0	6	\$829.60	\$138.27	\$165.92	1.20
11100	BIOPSY OF SKIN LESION	4	4	0	4	\$237.96	\$59.49	\$59.49	1.00
31622	DIAGNOSTIC BRONCHOSCOPY	4	4	0	4	\$1,493.20	\$373.30	\$373.30	1.00
36415	DRAWING BLOOD	4	6	0	8	\$37.32	\$4.67	\$6.22	1.33
37799	VASCULAR SURGERY PROCEDURE	4	4	0	12	\$1,159.50	\$96.63	\$289.88	3.00
38255	38255	4	4	0	4	\$3,396.00	\$849.00	\$849.00	1.00
70486	CAT SCAN OF FACE, JAW	4	4	0	4	\$390.29	\$97.57	\$97.57	1.00
77315	RADIATION THERAPY DOSE PLAN	4	4	0	4	\$424.82	\$106.21	\$106.21	1.00
77321	RADIATION THERAPY PORT PLAN	4	4	0	4	\$995.27	\$248.82	\$248.82	1.00
77333	RADIATION TREATMENT AID(S)	4	5	0	6	\$486.35	\$81.06	\$97.27	1.20
77410	DAILY RADIATION THERAPY	4	6	0	21	\$1,507.70	\$71.80	\$251.28	3.50
78306	NUCLEAR SCAN OF SKELETON	4	5	0	5	\$503.25	\$100.65	\$100.65	1.00
78802	NUCLEAR EXAM OF LESIONS	4	4	0	4	\$393.60	\$98.40	\$98.40	1.00
84460	UV-ASSAY TRANSAMINASE (SGPT)	4	6	0	24	\$112.40	\$4.68	\$18.73	4.00
85007	DIFFERENTIAL WBC COUNT	4	10	0	17	\$84.23	\$4.95	\$8.42	1.70
85021	AUTOMATED HEMOGRAM	4	15	0	53	\$186.47	\$3.52	\$12.43	3.53
85025	AUTOMATED HEMOGRAM	4	4	0	4	\$82.90	\$20.73	\$20.73	1.00
85044	RETICULOCYTE COUNT	4	10	0	20	\$59.65	\$2.98	\$5.96	2.00
88262	CHROMOSOME COUNT:15-20 CELLS	4	5	0	6	\$1,200.75	\$200.13	\$240.15	1.20
90215	HOSPITAL CARE,NEW, INTERMED	4	6	0	6	\$515.70	\$85.95	\$85.95	1.00
90240	HOSPITAL VISIT, BRIEF	4	8	0	24	\$765.75	\$31.91	\$95.72	3.00
90640	BRIEF FOLLOW-UP CONSULT	4	9	1	13	\$240.60	\$18.51	\$26.73	1.44
90699	GENERAL MEDICAL SERVICE	4	5	28	34	\$3,122.20	\$91.83	\$624.44	6.80
90784	INJECTION (IV)	4	6	7	17	\$562.20	\$33.07	\$93.70	2.83
90843	PSYCHOTHERAPY, 20-30 MIN	4	10	2	20	\$876.08	\$43.80	\$87.61	2.00
94656	INITIAL VENTILATOR MANAGEMENT	4	4	0	4	\$414.34	\$103.59	\$103.59	1.00
96408	CHEMOTHERAPY, PUSH TECHNIQUE	4	4	0	4	\$183.19	\$45.80	\$45.80	1.00
96545	PROVIDE CHEMOTHERAPY AGENT	4	8	-8	15	\$1,330.79	\$88.72	\$166.35	1.88
96549	CHEMOTHERAPY, UNSPECIFIED	4	9	70	70	\$104.19	\$1.49	\$11.58	7.78

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
99082	UNUSUAL PHYSICIAN TRAVEL	4	11	0	32	\$4,581.71	\$143.18	\$416.52	2.91
99172	CRITICAL CARE, FOLLOW-UP	4	16	0	112	\$7,971.40	\$71.17	\$498.21	7.00
36299	VESSEL INJECTION PROCEDURE	3	3	0	2	\$761.73	\$380.87	\$253.91	0.67
36410	DRAWING BLOOD	3	9	0	21	\$1,497.20	\$71.30	\$166.36	2.33
36620	INSERTION CATHETER, ARTERY	3	3	0	2	\$147.30	\$73.65	\$49.10	0.67
64999	NERVOUS SYSTEM SURGERY	3	3	0	3	\$893.00	\$297.67	\$297.67	1.00
70460	CONTRAST CAT SCAN OF HEAD	3	3	0	3	\$410.35	\$136.78	\$136.78	1.00
70551	MAGNETIC IMAGE, BRAIN (MRI)	3	3	0	3	\$1,085.00	\$361.67	\$361.67	1.00
72050	X-RAY EXAM OF NECK SPINE	3	3	0	3	\$56.04	\$18.68	\$18.68	1.00
75898	FOLLOW-UP ANGIOGRAM	3	3	0	3	\$403.65	\$100.91	\$134.55	1.33
77299	RADIATION THERAPY PLANNING	3	3	0	4	\$493.40	\$61.67	\$164.47	2.67
77499	RADIATION THERAPY MANAGEMENT	3	3	0	8	\$297.27	\$49.55	\$99.09	2.00
80004	4 CLINICAL CHEMISTRY TESTS	3	9	0	6	\$214.44	\$8.94	\$23.83	2.67
80019	19 OR MORE BLOOD/URINE TESTS	3	11	0	24	\$1,123.10	\$18.11	\$102.10	5.64
82575	CREATININE CLEARANCE TEST	3	3	0	62	\$25.04	\$6.26	\$8.35	1.33
82947	ASSAY BODY FLUID, GLUCOSE	3	3	0	4	\$16.30	\$5.43	\$5.43	1.00
82977	ASSAY OF GGT ENZYME	3	4	0	21	\$100.40	\$4.78	\$25.10	5.25
84478	ASSAY BLOOD TRIGLYCERIDES	3	4	0	8	\$167.20	\$20.90	\$41.80	2.00
85024	AUTOMATED HEMOGRAM	3	4	0	7	\$174.63	\$24.95	\$43.66	1.75
85027	AUTOMATED HEMOGRAM	3	5	0	26	\$144.57	\$5.56	\$28.91	5.20
85610	PROTHROMBIN TIME	3	8	0	26	\$41.65	\$1.60	\$5.21	3.25
85730	THROMBOPLASTIN TIME, PARTIAL	3	6	0	25	\$42.04	\$1.68	\$7.01	4.17
86317	IMMUNOASSAY, INFECTIOUS AGENT	3	9	0	16	\$209.40	\$13.09	\$23.27	1.78
86329	IMMUNODIFFUSION, EACH	3	6	0	12	\$134.30	\$11.19	\$22.38	2.00
87040	BLOOD CULTURE FOR BACTERIA	3	13	0	84	\$444.47	\$5.29	\$34.19	6.46
87070	CULTURE SPECIMEN, BACTERIA	3	9	0	50	\$575.50	\$11.51	\$63.94	5.56
87086	URINE CULTURE, COLONY COUNT	3	5	0	13	\$61.25	\$4.71	\$12.25	2.60
88107	MICROSCOPIC EXAM OF CELLS	3	5	0	5	\$128.42	\$25.68	\$25.68	1.00
88180	CELL MARKER STUDY	3	3	0	4	\$89.31	\$22.33	\$29.77	1.33
88302	TISSUE EXAM BY PATHOLOGIST	3	4	0	5	\$212.63	\$42.53	\$53.16	1.25
90020	OFFICE/OP VISIT, NEW, COMPRH	3	3	3	3	\$190.00	\$63.33	\$63.33	1.00
90517	EMERGENCY CARE, NEW, EXTEND	3	3	2	3	\$281.10	\$93.70	\$93.70	1.00
90781	IV INFUSION, ADDITIONAL HOUR	3	6	12	24	\$1,121.50	\$46.73	\$186.92	4.00
93308	ECHO EXAM OF HEART	3	3	0	3	\$204.67	\$68.22	\$68.22	1.00
93325	DOPPLER COLOR FLOW	3	4	2	4	\$220.75	\$55.19	\$55.19	1.00
94799	PULMONARY SERVICE/PROCEDURE	3	3	9	9	\$359.10	\$39.90	\$119.70	3.00
96450	CHEMOTHERAPY, INTO CNS	3	14	8	19	\$1,750.50	\$92.13	\$125.04	1.36
96530	PUMP REFILLING, MAINTENANCE	3	6	5	7	\$408.48	\$58.35	\$68.08	1.17
99054	MEDICAL SERVICES, UNUSUAL HRS	3	6	0	13	\$361.80	\$27.83	\$60.30	2.17
99151	PROLONGED MD ATTENDANCE	3	5	0	5	\$425.00	\$85.00	\$85.00	1.00
99171	CRITICAL CARE, FOLLOW-UP	3	19	0	78	\$4,106.44	\$52.65	\$216.13	4.11
99214	OFFICE/OUTPATIENT VISIT, EST	3	3	2	3	\$152.50	\$50.83	\$50.83	1.00
99252	INITIAL INPATIENT CONSULT	3	3	0	3	\$233.78	\$77.93	\$77.93	1.00
99262	FOLLOW-UP INPATIENT CONSULT	3	3	0	3	\$165.35	\$55.12	\$55.12	1.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDB)

HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

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(continued)

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99291	CRITICAL CARE, FIRST HOUR	3	3	0	10	\$1,482.48	\$148.25	\$494.16	3.33
31500	INSERT OF EMERGENCY AIRWAY	2	2	0	2	\$202.14	\$101.07	\$101.07	1.00
32000	DRAINAGE OF CHEST	2	2	0	2	\$120.40	\$60.20	\$60.20	1.00
36010	PLACE CATHETER IN VEIN	2	2	0	2	\$806.00	\$403.00	\$403.00	1.00
36440	BLOOD TRANSFUSION SERVICE	2	2	0	13	\$1,047.00	\$80.54	\$149.57	1.86
70450	CAT SCAN OF HEAD OR BRAIN	2	4	0	4	\$256.35	\$64.09	\$64.09	1.00
70480	CAT SCAN OF SKULL	2	2	0	2	\$238.10	\$119.05	\$119.05	1.00
71035	CHEST X-RAY	2	2	0	3	\$29.83	\$9.94	\$14.92	1.50
72100	X-RAY EXAM OF LOWER SPINE	2	2	0	2	\$53.95	\$26.98	\$26.98	1.00
72146	MAGNETIC IMAGE, CHEST SPINE	2	2	0	2	\$379.50	\$189.75	\$189.75	1.00
72170	X-RAY EXAM OF PELVIS	2	2	0	2	\$39.75	\$19.88	\$19.88	1.00
72196	MAGNETIC IMAGE, PELVIS	2	2	0	2	\$229.03	\$114.52	\$114.52	1.00
73500	X-RAY EXAM OF HIP	2	2	0	2	\$52.50	\$26.25	\$26.25	1.00
74010	X-RAY EXAM OF ABDOMEN	2	4	0	4	\$94.40	\$23.60	\$23.60	1.00
76000	FLUOROSCOPE EXAMINATION	2	2	0	2	\$36.42	\$18.21	\$18.21	1.00
76020	X-RAYS FOR BONE AGE	2	2	0	2	\$60.00	\$30.00	\$30.00	1.00
76370	CAT SCAN FOR THERAPY GUIDE	2	2	0	2	\$217.90	\$108.95	\$108.95	1.00
76856	ECHO EXAM OF PELVIS	2	2	0	2	\$142.90	\$71.45	\$71.45	1.00
77310	RADIATION THERAPY DOSE PLAN	2	2	0	2	\$262.20	\$131.10	\$131.10	1.00
77332	RADIATION TREATMENT AID(S)	2	2	0	4	\$138.60	\$34.65	\$69.30	2.00
77370	RADIATION PHYSICS CONSULT	2	2	0	2	\$280.19	\$140.10	\$140.10	1.00
77409	RADIATION TREATMENT DELIVERY	2	3	0	7	\$581.10	\$83.01	\$193.70	2.33
77413	RADIATION TREATMENT DELIVERY	2	7	0	17	\$1,802.26	\$106.02	\$257.47	2.43
77415	PORT VERIFICATION FILMS	2	2	0	2	\$55.00	\$27.50	\$27.50	1.00
78472	NUCLEAR SCAN, HEART MUSCLE	2	2	0	2	\$131.79	\$65.90	\$65.90	1.00
78800	NUCLEAR EXAM OF LESION	2	2	0	2	\$39.40	\$19.70	\$19.70	1.00
78803	NUCLEAR SCAN OF TUMOR (3D)	2	2	0	4	\$296.05	\$74.01	\$148.03	2.00
78890	AUTOMATED DATA, NUCLEAR MED	2	2	0	2	\$86.00	\$43.00	\$43.00	1.00
78999	NUCLEAR DIAGNOSTIC EXAM	2	2	0	3	\$1,214.60	\$404.87	\$404.87	1.00
80012	12 CLINICAL CHEMISTRY TESTS	2	3	0	23	\$367.22	\$15.97	\$52.46	3.29
80502	LAB PATHOLOGY CONSULTATION	2	4	0	9	\$196.77	\$21.86	\$49.19	2.25
83615	UV-ASSAY BLOOD LDH ENZYME	2	3	0	12	\$89.00	\$7.42	\$29.67	4.00
84132	ASSAY BLOOD POTASSIUM	2	3	0	5	\$26.95	\$5.39	\$8.98	1.67
84133	ASSAY URINE POTASSIUM	2	2	0	2	\$9.30	\$4.65	\$4.65	1.00
84450	UV-ASSAY TRANSAMINASE (SGOT)	2	2	0	2	\$30.00	\$15.00	\$15.00	1.00
85022	AUTOMATED HEMOGRAM	2	2	0	55	\$422.20	\$7.68	\$32.48	4.23
85029	AUTOMATED HEMOGRAM	2	3	0	7	\$70.35	\$10.05	\$23.45	2.33
85048	WHITE BLOOD CELL (WBC) COUNT	2	2	0	2	\$13.50	\$6.75	\$6.75	1.00
86016	RBC ANTIBODY SCREEN	2	2	0	2	\$14.21	\$7.11	\$7.11	1.00
86077	PHYSICIAN BLOOD BANK SERVICE	2	3	0	3	\$90.00	\$30.00	\$30.00	1.00
86095	BLOOD TYPING, OTHER ANTIGENS	2	3	0	21	\$190.40	\$9.07	\$63.47	7.00
86255	FLUORESCENT ANTIBODY; SCREEN	2	2	0	2	\$3.32	\$1.66	\$1.66	1.00
86256	FLUORESCENT ANTIBODY; TITER	2	2	0	2	\$54.80	\$27.40	\$27.40	1.00
86287	HEPATITIS HAA, RIA, OR EIA	2	2	0	2	\$32.89	\$16.44	\$16.44	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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----- BMI_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

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86289	HEPATITIS BC ANTIBODY TEST	2	2	0	2	\$36.37	\$18.19	\$18.19	1.00
86296	HEPATITIS A ANTIBODY TEST	2	2	0	2	\$40.45	\$20.23	\$20.23	1.00
86312	HIV ANTIBODY DETECTION	2	3	0	3	\$88.70	\$29.57	\$29.57	1.00
86349	LEUKOCYTE TRANSFUSION	2	2	0	4	\$649.90	\$162.48	\$324.95	2.00
86999	IMMUNOLOGY PROCEDURE	2	9	0	33	\$814.90	\$24.69	\$90.54	3.67
87106	FUNGUS IDENTIFICATION	2	6	0	60	\$566.90	\$9.45	\$94.48	10.00
87205	SMEAR, STAIN & INTERPRET	2	3	0	4	\$12.80	\$3.20	\$4.27	1.33
87210	SMEAR, STAIN & INTERPRET	2	2	0	2	\$7.08	\$3.54	\$3.54	1.00
87250	VIRUS INOCULATION FOR TEST	2	6	0	20	\$396.00	\$19.80	\$66.00	3.33
88160	CYTOPATHOLOGY	2	3	0	3	\$66.50	\$22.17	\$22.17	1.00
88280	CHROMOSOME KARYOTYPE STUDY	2	2	0	5	\$178.00	\$35.60	\$89.00	2.50
88342	IMMUNOCYTOCHEMISTRY	2	2	0	4	\$191.25	\$47.81	\$95.63	2.00
88346	IMMUNOFLUORESCENT STUDY	2	4	0	11	\$162.88	\$14.81	\$40.72	2.75
89050	BODY FLUID CELL COUNT	2	2	0	4	\$47.75	\$11.94	\$23.87	2.00
89051	BODY FLUID CELL COUNT	2	2	0	4	\$30.79	\$7.70	\$15.40	2.00
90200	HOSPITAL CARE, NEW, BRIEF	2	3	0	3	\$272.10	\$90.70	\$90.70	1.00
90510	EMERGENCY CARE, NEW, LIMITED	2	2	2	2	\$97.75	\$48.88	\$48.88	1.00
90801	PSYCHIATRIC INTERVIEW	2	2	0	2	\$250.00	\$125.00	\$125.00	1.00
92557	COMPREHENSIVE HEARING TEST	2	2	0	2	\$96.80	\$48.40	\$48.40	1.00
93000	ELECTROCARDIOGRAM, COMPLETE	2	2	2	2	\$35.00	\$17.50	\$17.50	1.00
94060	EVALUATION OF WHEEZING	2	2	2	2	\$97.44	\$48.72	\$48.72	1.00
94375	RESPIRATORY FLOW VOLUME LOOP	2	2	2	3	\$114.50	\$38.17	\$57.25	1.50
94657	CONT. VENTILATOR MANAGEMENT	2	4	0	10	\$1,013.75	\$101.38	\$253.44	2.50
95819	ELECTROENCEPHALOGRAPH (EEG)	2	2	1	2	\$96.00	\$48.00	\$48.00	1.00
97010	HOT OR COLD PACKS THERAPY	2	2	21	21	\$1,424.00	\$67.81	\$712.00	10.50
98902	CONFERENCE WITH PHYSICIAN	2	2	0	2	\$260.00	\$130.00	\$130.00	1.00
99000	SPECIMEN HANDLING	2	2	0	4	\$5.35	\$1.34	\$2.68	2.00
99150	PROLONGED MD ATTENDANCE	2	7	0	7	\$794.51	\$113.50	\$113.50	1.00
99212	OFFICE/OUTPATIENT VISIT, EST	2	3	2	3	\$81.95	\$27.32	\$27.32	1.00
99213	OFFICE/OUTPATIENT VISIT, EST	2	3	4	4	\$96.00	\$24.00	\$24.00	1.33
99215	OFFICE/OUTPATIENT VISIT, EST	2	4	3	4	\$344.63	\$86.16	\$86.16	1.00
99221	INITIAL HOSPITAL CARE	2	2	0	2	\$183.90	\$91.95	\$91.95	1.00
99254	INITIAL INPATIENT CONSULT	2	2	0	2	\$154.20	\$77.10	\$77.10	1.00
99261	FOLLOW-UP INPATIENT CONSULT	2	5	0	5	\$220.70	\$44.14	\$44.14	1.00
99292	CRITICAL CARE, ADDL 30 MIN	2	2	0	6	\$493.30	\$82.22	\$246.65	3.00
11101	BIOPSY, EACH ADDED LESION	1	1	0	2	\$39.95	\$19.98	\$39.95	2.00
17340	CRYOTHERAPY OF SKIN	1	1	0	1	\$15.00	\$15.00	\$15.00	1.00
31600	INCISION OF WINDPIPE	1	1	0	1	\$55.58	\$55.58	\$55.58	1.00
31628	BRONCHOSCOPY WITH BIOPSY	1	1	0	1	\$310.35	\$310.35	\$310.35	1.00
31635	REMOVE FOREIGN BODY, AIRWAY	1	1	0	1	\$383.04	\$383.04	\$383.04	1.00
31645	BRONCHOSCOPY, CLEAR AIRWAYS	1	1	0	1	\$437.80	\$437.80	\$437.80	1.00
31659	BRONCHOSCOPIC PROCEDURES	1	1	0	1	\$362.33	\$362.33	\$362.33	1.00
32095	BIOPSY THROUGH CHEST WALL	1	1	0	1	\$150.87	\$150.87	\$150.87	1.00
32220	RELEASE OF LUNG	1	1	0	1	\$1,600.00	\$1,600.00	\$1,600.00	1.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDB)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
32225	PARTIAL RELEASE OF LUNG	1	1	0	1	\$920.00	\$920.00	\$920.00	1.00
36000	PLACE NEEDLE IN VEIN	1	1	0	1	\$6.00	\$6.00	\$6.00	1.00
36260	INSERTION OF INFUSION PUMP	1	1	0	1	\$654.00	\$654.00	\$654.00	1.00
36405	DRAWING BLOOD	1	1	0	1	\$56.70	\$56.70	\$56.70	1.00
36490	INSERTION OF CATHETER, VEIN	1	1	0	1	\$544.00	\$544.00	\$544.00	1.00
36497	REMOVE INFUSION PUMP	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
36533	INSERTION OF ACCESS PORT	1	1	0	1	\$692.90	\$692.90	\$692.90	1.00
36640	INSERTION CATHETER, ARTERY	1	1	0	1	\$186.60	\$186.60	\$186.60	1.00
36800	INSERTION OF CANNULA	1	1	0	1	\$396.60	\$396.60	\$396.60	1.00
38245	38245	1	1	0	1	\$117.75	\$117.75	\$117.75	1.00
38246	38246	1	1	0	1	\$1,125.00	\$1,125.00	\$1,125.00	1.00
43239	UPPER GI ENDOSCOPY, BIOPSY	1	1	0	1	\$745.00	\$745.00	\$745.00	1.00
43246	PLACE GASTROSTOMY TUBE	1	1	0	1	\$450.00	\$450.00	\$450.00	1.00
45300	PROCTOSIGMOIDOSCOPY	1	1	0	1	\$75.75	\$75.75	\$75.75	1.00
45331	SIGMOIDOSCOPY AND BIOPSY	1	1	0	1	\$219.60	\$219.60	\$219.60	1.00
45378	DIAGNOSTIC COLONOSCOPY	1	1	0	1	\$300.00	\$300.00	\$300.00	1.00
49000	EXPLORATION OF ABDOMEN	1	1	0	2	\$1,072.53	\$536.27	\$1,072.53	2.00
49420	INSERT ABDOMINAL DRAIN	1	1	0	1	\$428.20	\$428.20	\$428.20	1.00
53670	INSERT URINARY CATHETER	1	1	0	1	\$30.00	\$30.00	\$30.00	1.00
60540	EXPLORE ADRENAL GLAND	1	1	0	1	\$322.00	\$322.00	\$322.00	1.00
62180	ESTABLISH BRAIN CAVITY SHUNT	1	1	0	1	\$95.00	\$95.00	\$95.00	1.00
62288	INJECTION INTO SPINAL CANAL	1	1	0	1	\$214.20	\$214.20	\$214.20	1.00
69436	CREATE EARDRUM OPENING	1	1	0	1	\$310.00	\$310.00	\$310.00	1.00
70110	X-RAY EXAM OF JAW	1	1	0	2	\$43.50	\$21.75	\$43.50	2.00
70250	X-RAY EXAM OF SKULL	1	1	0	1	\$51.50	\$51.50	\$51.50	1.00
70490	CAT SCAN OF NECK TISSUE	1	1	0	1	\$148.30	\$148.30	\$148.30	1.00
70552	MAGNETIC IMAGE, BRAIN (MRI)	1	1	0	1	\$400.00	\$400.00	\$400.00	1.00
71030	CHEST X-RAY	1	1	0	1	\$30.40	\$30.40	\$30.40	1.00
71100	X-RAY EXAM OF RIBS	1	1	0	1	\$20.30	\$20.30	\$20.30	1.00
71101	X-RAY EXAM OF RIBS, CHEST	1	1	0	1	\$45.75	\$45.75	\$45.75	1.00
72070	X-RAY EXAM OF THORAX SPINE	1	1	0	1	\$38.40	\$38.40	\$38.40	1.00
72110	X-RAY EXAM OF LOWER SPINE	1	1	0	1	\$36.40	\$36.40	\$36.40	1.00
72141	MAGNETIC IMAGE, NECK SPINE	1	1	0	1	\$225.00	\$225.00	\$225.00	1.00
72142	MAGNETIC IMAGE, NECK SPINE	1	1	0	1	\$360.00	\$360.00	\$360.00	1.00
72147	MAGNETIC IMAGE, CHEST SPINE	1	1	0	1	\$350.00	\$350.00	\$350.00	1.00
72148	MAGNETIC IMAGE, LUMBAR SPINE	1	1	0	1	\$160.00	\$160.00	\$160.00	1.00
72149	MAGNETIC IMAGE, LUMBAR SPINE	1	1	0	1	\$160.50	\$160.50	\$160.50	1.00
73010	X-RAY EXAM OF SHOULDER BLADE	1	1	0	1	\$11.94	\$11.94	\$11.94	1.00
73060	X-RAY EXAM OF HUMERUS	1	1	0	1	\$16.80	\$16.80	\$16.80	1.00
73560	X-RAY EXAM OF KNEE	1	1	0	2	\$35.20	\$17.60	\$35.20	2.00
73562	X-RAY EXAM OF KNEE	1	1	0	1	\$14.14	\$14.14	\$14.14	1.00
73620	X-RAY EXAM OF FOOT	1	1	0	1	\$35.00	\$35.00	\$35.00	1.00
74181	MAGNETIC IMAGE, ABDOMEN(MRI)	1	1	0	1	\$63.50	\$63.50	\$63.50	1.00
74247	CONTRAST XRAY UPPER GI TRACT	1	1	0	1	\$72.20	\$72.20	\$72.20	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

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(continued)

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74476	XRAY CONTROL CATHETER INSERT	1	1	0	1	\$326.70	\$326.70	\$326.70	1.00
75821	VEIN X-RAY, ARM/LEG	1	1	0	1	\$170.00	\$170.00	\$170.00	1.00
75823	VEIN X-RAY, ARMS/LEGS	1	1	0	1	\$34.00	\$34.00	\$34.00	1.00
75984	XRAY CONTROL CATHETER CHANGE	1	1	0	1	\$24.29	\$24.29	\$24.29	1.00
76003	NEEDLE LOCALIZATION BY X-RAY	1	1	0	1	\$37.05	\$37.05	\$37.05	1.00
76091	MAMMOGRAM, BOTH BREASTS	1	1	0	1	\$101.00	\$101.00	\$101.00	1.00
76604	ECHO EXAM OF CHEST	1	1	0	2	\$16.72	\$8.36	\$16.72	2.00
76770	ECHO EXAM ABDOMEN BACK WALL	1	1	0	1	\$71.20	\$71.20	\$71.20	1.00
76935	ECHO GUIDE FOR CHEST TAP	1	1	0	2	\$45.39	\$22.69	\$45.39	2.00
76970	ULTRASOUND EXAM FOLLOW-UP	1	1	0	1	\$56.45	\$56.45	\$56.45	1.00
77261	RADIATION THERAPY PLANNING	1	1	0	1	\$342.40	\$342.40	\$342.40	1.00
77262	RADIATION THERAPY PLANNING	1	1	0	3	\$189.00	\$63.00	\$189.00	3.00
77285	SET RADIATION THERAPY FIELD	1	1	0	1	\$157.00	\$157.00	\$157.00	1.00
77305	RADIATION THERAPY DOSE PLAN	1	1	0	1	\$115.90	\$115.90	\$115.90	1.00
77399	EXTERNAL RADIATION DOSIMETRY	1	1	0	1	\$125.57	\$125.57	\$125.57	1.00
77401	RADIATION TREATMENT DELIVERY	1	3	0	60	\$1,606.50	\$26.78	\$335.50	20.00
77402	RADIATION TREATMENT DELIVERY	1	1	0	1	\$79.50	\$79.50	\$79.50	1.00
77405	DAILY RADIATION THERAPY	1	2	0	2	\$189.00	\$94.50	\$94.50	1.00
77406	RADIATION TREATMENT DELIVERY	1	1	0	3	\$189.00	\$63.00	\$189.00	3.00
77425	WEEKLY RADIATION THERAPY	1	1	0	5	\$23.25	\$4.65	\$23.25	5.00
78215	NUCLEAR SCAN, LIVER & SPLEEN	1	1	0	1	\$90.00	\$90.00	\$90.00	1.00
78300	NUCLEAR SCAN OF BONE	1	1	0	1	\$56.80	\$56.80	\$56.80	1.00
78474	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$166.00	\$166.00	\$166.00	1.00
78479	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$21.60	\$21.60	\$21.60	1.00
78499	CARDIOVASCULAR NUCLEAR EXAM	1	1	0	1	\$144.40	\$144.40	\$144.40	1.00
78725	NUCLEAR EXAM OF KIDNEY	1	1	0	1	\$86.50	\$86.50	\$86.50	1.00
79999	NUCLEAR MEDICINE THERAPY	1	1	0	1	\$222.70	\$222.70	\$222.70	1.00
80002	1-2 CLINICAL CHEM TESTS	1	1	0	1	\$14.64	\$14.64	\$14.64	1.00
80006	6 CLINICAL CHEMISTRY TESTS	1	1	0	1	\$6.00	\$6.00	\$6.00	1.00
80009	9 CLINICAL CHEMISTRY TESTS	1	1	0	1	\$250.70	\$250.70	\$250.70	1.00
80010	10 CLINICAL CHEMISTRY TESTS	1	1	0	2	\$30.00	\$15.00	\$30.00	2.00
80016	13-16 BLOOD/URINE TESTS	1	1	0	1	\$18.75	\$18.75	\$18.75	1.00
80031	DRUG MONITORING, ONE DRUG	1	2	0	6	\$36.00	\$6.00	\$36.00	3.00
80059	HEPATITIS PANEL	1	1	0	1	\$25.00	\$25.00	\$25.00	1.00
80061	LIPID PROFILE	1	2	0	10	\$141.00	\$14.10	\$70.50	5.00
81002	URINALYSIS WITHOUT SCOPE	1	1	0	1	\$5.25	\$5.25	\$5.25	1.00
82112	ASSAY OF AMIKACIN	1	2	0	6	\$36.00	\$6.00	\$36.00	3.00
82150	ASSAY OF SERUM AMYLASE	1	1	0	2	\$49.50	\$24.75	\$49.50	2.00
82205	ASSAY OF BARBITURATES	1	3	0	4	\$26.00	\$6.50	\$8.67	1.33
82436	ASSAY URINE CHLORIDES	1	1	0	1	\$4.00	\$4.00	\$4.00	1.00
82550	ASSAY CPK IN BLOOD	1	3	0	5	\$29.00	\$5.80	\$9.67	1.67
82552	ASSAY CPK IN BLOOD	1	1	0	1	\$12.80	\$12.80	\$12.80	1.00
82565	ASSAY BLOOD CREATININE	1	1	0	1	\$4.50	\$4.50	\$4.50	1.00
82607	RIA ASSAY FOR VITAMIN B-12	1	1	0	1	\$8.10	\$8.10	\$8.10	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

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82746	BLOOD FOLIC ACID RIA	1	1	0	1	\$11.80	\$11.80	\$11.80	1.00
82784	ASSAY GAMMAGLOBULIN A/D/G/M	1	1	0	1	\$22.74	\$22.74	\$22.74	1.00
83540	ASSAY SERUM IRON	1	1	0	1	\$6.00	\$6.00	\$6.00	1.00
83555	SERUM IRON BINDING, AUTO-TEST	1	1	0	1	\$6.75	\$6.75	\$6.75	1.00
83750	ASSAY BLOOD MAGNESIUM	1	4	0	12	\$32.91	\$2.74	\$8.23	3.00
84075	ASSAY ALKALINE PHOSPHATASE	1	1	0	1	\$22.00	\$22.00	\$22.00	1.00
84100	ASSAY BLOOD PHOSPHORUS	1	1	0	1	\$4.50	\$4.50	\$4.50	1.00
84195	ASSAY SPINAL FLUID PROTEIN	1	1	0	1	\$34.20	\$34.20	\$34.20	1.00
84300	ASSAY URINE SODIUM	1	1	0	1	\$4.00	\$4.00	\$4.00	1.00
84703	CHORIONIC GONADOTROPIN ASSAY	1	1	0	1	\$17.06	\$17.06	\$17.06	1.00
84810	ASSAY TOBRAMYCIN	1	1	0	1	\$12.60	\$12.60	\$12.60	1.00
85002	BLEEDING TIME TEST	1	1	0	1	\$5.50	\$5.50	\$5.50	1.00
85014	HEMATOCRIT	1	1	0	1	\$3.30	\$3.30	\$3.30	1.00
85018	HEMOGLOBIN, COLORIMETRIC	1	1	0	1	\$4.50	\$4.50	\$4.50	1.00
85031	MANUAL HEMOGRAM, COMPLETE CBC	1	1	0	1	\$4.88	\$4.88	\$4.88	1.00
85041	RED BLOOD CELL (RBC) COUNT	1	2	0	5	\$20.30	\$4.06	\$10.15	2.50
85101	ASPIRATE, STAIN BONE MARROW	1	1	0	1	\$8.70	\$8.70	\$8.70	1.00
85109	BONE MARROW PREPARATION	1	1	0	1	\$19.80	\$19.80	\$19.80	1.00
85362	FIBRIN DEGRADATION PRODUCTS	1	2	0	13	\$13.26	\$1.02	\$6.63	6.50
85376	FIBRINOGEN, THROMBIN	1	2	0	12	\$8.57	\$0.71	\$4.29	6.00
85540	WBC ALKALINE PHOSPHATASE	1	1	0	1	\$4.17	\$4.17	\$4.17	1.00
85580	BLOOD PLATELET COUNT	1	1	0	1	\$22.00	\$22.00	\$22.00	1.00
85590	PLATELET PHASE MICROSCOPY	1	2	0	3	\$38.40	\$12.80	\$19.20	1.50
85650	RBC SEDIMENTATION RATE	1	2	0	2	\$6.20	\$3.10	\$3.10	1.00
85999	HEMATOLOGY PROCEDURE	1	1	0	2	\$10.42	\$5.21	\$10.42	2.00
86006	ANTIBODY, QUALITATIVE, FIRST	1	1	0	1	\$13.35	\$13.35	\$13.35	1.00
86021	WBC ANTIBODY IDENTIFICATION	1	1	0	1	\$7.00	\$7.00	\$7.00	1.00
86031	ANTI HUMAN GLOBULIN TEST	1	1	0	2	\$7.20	\$3.60	\$7.20	2.00
86032	ANTI HUMAN GLOBULIN TEST	1	2	0	5	\$20.00	\$4.00	\$10.00	2.50
86083	BLOOD TYPING; ANTIBODY SCREEN	1	1	0	1	\$7.58	\$7.58	\$7.58	1.00
86084	BLOOD TYPING; ANTIGEN SCREEN	1	1	0	3	\$11.11	\$3.70	\$11.11	3.00
86291	HEPATITIS BS ANTIBODY TEST	1	1	0	1	\$27.69	\$27.69	\$27.69	1.00
86299	HEPATITIS A ANTIBODY TEST	1	1	0	1	\$18.68	\$18.68	\$18.68	1.00
86319	IMMUNOASSAY FOR DRUGS	1	1	0	1	\$42.40	\$42.40	\$42.40	1.00
86357	LYMPHOCYTES, T&B DISTINCTION	1	3	0	9	\$64.80	\$7.20	\$21.60	3.00
87045	STOOL CULTURE FOR BACTERIA	1	2	0	3	\$30.00	\$10.00	\$15.00	1.50
87060	NOSE/THROAT CULTURE, BACTERIA	1	1	0	1	\$4.50	\$4.50	\$4.50	1.00
87072	CULTURE OF SPECIMEN BY KIT	1	1	0	2	\$42.00	\$21.00	\$42.00	2.00
87081	BACTERIA CULTURE SCREEN	1	1	0	1	\$19.00	\$19.00	\$19.00	1.00
87082	CULTURE OF SPECIMEN BY KIT	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00
87101	SKIN FUNGUS CULTURE	1	1	0	1	\$4.17	\$4.17	\$4.17	1.00
87102	FUNGUS ISOLATION CULTURE	1	2	0	3	\$46.00	\$15.33	\$23.00	1.50
87163	SPECIAL MICROBIOLOGY CULTURE	1	1	0	1	\$6.44	\$6.44	\$6.44	1.00
87181	ANTIBIOTIC SENSITIVITY, EACH	1	4	0	16	\$64.00	\$4.00	\$16.00	4.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
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----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

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87184	ANTIBIOTIC SENSITIVITY, EACH	1	1	0	1	\$3.27	\$3.27	\$3.27	1.00
87186	ANTIBIOTIC SENSITIVITY, MIC	1	1	0	1	\$4.17	\$4.17	\$4.17	1.00
87188	ANTIBIOTIC SENSITIVITY, EACH	1	1	0	1	\$5.00	\$5.00	\$5.00	1.00
88162	CYTOPATHOLOGY, EXTENSIVE	1	1	0	1	\$15.94	\$15.94	\$15.94	1.00
88170	FINE NEEDLE ASPIRATION	1	1	0	1	\$34.65	\$34.65	\$34.65	1.00
88173	INTERPRETATION OF SHEAR	1	1	0	1	\$68.25	\$68.25	\$68.25	1.00
88230	TISSUE CULTURE, LYMPHOCYTE	1	1	0	2	\$118.00	\$59.00	\$118.00	2.00
88235	TISSUE CULTURE, PLACENTA	1	1	0	1	\$160.00	\$160.00	\$160.00	1.00
88237	TISSUE CULTURE, BONE MARROW	1	3	0	9	\$433.00	\$48.11	\$144.33	3.00
88261	CHROMOSOME ANALYSIS: 5 CELLS	1	1	0	1	\$152.00	\$152.00	\$152.00	1.00
88285	CHROMOSOME COUNT: ADDITIONAL	1	1	0	15	\$96.00	\$6.40	\$96.00	15.00
88300	TISSUE EXAM BY PATHOLOGIST	1	1	0	1	\$27.50	\$27.50	\$27.50	1.00
88309	TISSUE EXAM BY PATHOLOGIST	1	1	0	1	\$187.50	\$187.50	\$187.50	1.00
88318	CHEMICAL HISTOCHEMISTRY	1	3	0	4	\$40.00	\$10.00	\$13.33	1.33
88319	ENZYME HISTOCHEMISTRY	1	1	0	1	\$26.25	\$26.25	\$26.25	1.00
88325	COMPREHENSIVE REVIEW OF DATA	1	1	0	1	\$78.40	\$78.40	\$78.40	1.00
88347	IMMUNOFLOURESCENT STUDY	1	2	0	2	\$113.70	\$56.85	\$56.85	1.00
88348	ELECTRON MICROSCOPY	1	1	0	1	\$153.75	\$153.75	\$153.75	1.00
88399	SURGICAL PATHOLOGY PROCEDURE	1	1	0	1	\$167.00	\$167.00	\$167.00	1.00
89399	PATHOLOGY LAB PROCEDURE	1	3	0	4	\$752.00	\$188.00	\$250.67	1.33
90000	OFFICE/OP VISIT, NEW, BRIEF	1	1	1	1	\$318.00	\$318.00	\$318.00	1.00
90010	OFFICE/OP VISIT, NEW, LTD	1	1	1	1	\$27.00	\$27.00	\$27.00	1.00
90160	HOME VISIT, INTERMED	1	1	2	2	\$161.00	\$80.50	\$161.00	2.00
90570	EMERGENCY CARE, EXTENDED	1	1	1	1	\$41.25	\$41.25	\$41.25	1.00
90650	2ND OR 3RD OPINION	1	2	0	3	\$96.06	\$32.02	\$48.03	1.50
90712	ORAL POLIOVIRUS IMMUNIZATION	1	1	1	1	\$10.50	\$10.50	\$10.50	1.00
90742	SPECIAL PASSIVE IMMUNIZATION	1	3	2	7	\$945.00	\$135.00	\$315.00	2.33
90764	PREVENTIVE MEDICINE, INFANT	1	1	1	1	\$18.75	\$18.75	\$18.75	1.00
90788	INJECTION OF ANTIBIOTIC	1	2	4	4	\$102.72	\$25.68	\$51.36	2.00
90825	EVALUATION OF TESTS/RECORDS	1	2	0	3	\$192.90	\$64.30	\$96.45	1.50
90830	PSYCHOLOGICAL TESTING	1	1	0	1	\$50.00	\$50.00	\$50.00	1.00
90935	HEMODIALYSIS, ONE EVALUATION	1	1	2	4	\$299.47	\$74.87	\$299.47	4.00
90937	HEMODIALYSIS, REPEATED EVAL.	1	1	0	2	\$860.80	\$430.40	\$860.80	2.00
92002	EYE EXAM, NEW PATIENT	1	1	1	1	\$15.00	\$15.00	\$15.00	1.00
92012	EYE EXAM, ESTABLISHED PATIENT	1	1	1	1	\$0.00	\$0.00	\$0.00	1.00
92507	SPEECH/HEARING THERAPY	1	1	3	3	\$144.00	\$48.00	\$144.00	3.00
92551	PURE TONE HEARING TEST, AIR	1	1	1	1	\$25.00	\$25.00	\$25.00	1.00
92567	TYMPANOMETRY	1	1	0	1	\$35.00	\$35.00	\$35.00	1.00
92571	FILTERED SPEECH HEARING TEST	1	1	36	36	\$798.00	\$22.17	\$798.00	36.00
92581	EVOKED RESPONSE AUDIOMETRY	1	2	0	3	\$430.00	\$143.33	\$215.00	1.50
93018	CARDIOVASCULAR STRESS TEST	1	1	1	1	\$43.32	\$43.32	\$43.32	1.00
93042	RHYTHM ECG, REPORT	1	1	0	1	\$20.00	\$20.00	\$20.00	1.00
93312	ECHO EXAM OF HEART	1	1	1	1	\$357.00	\$357.00	\$357.00	1.00
93505	BIOPSY OF HEART LINING	1	1	1	1	\$318.75	\$318.75	\$318.75	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW TRANSP HOSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMNT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
93720	TOTAL BODY PLETHYSMOGRAPHY	1	1	1	1	\$35.00	\$35.00	\$35.00	1.00
93799	CARDIOVASCULAR PROCEDURE	1	1	0	1	\$16.10	\$16.10	\$16.10	1.00
93870	CAROTID ARTERY IMAGING	1	1	1	1	\$252.00	\$252.00	\$252.00	1.00
94150	VITAL CAPACITY TEST	1	1	1	1	\$14.00	\$14.00	\$14.00	1.00
94200	LUNG FUNCTION TEST (MBC/MV)	1	1	0	1	\$42.20	\$42.20	\$42.20	1.00
94250	EXPIRED GAS COLLECTION	1	1	1	1	\$7.00	\$7.00	\$7.00	1.00
94260	THORACIC GAS VOLUME	1	1	1	1	\$7.00	\$7.00	\$7.00	1.00
94360	MEASURE AIRFLOW RESISTANCE	1	1	1	1	\$27.00	\$27.00	\$27.00	1.00
94620	PULMONARY STRESS TESTING	1	1	1	1	\$36.37	\$36.37	\$36.37	1.00
94650	PRESSURE BREATHING (IPPB)	1	1	1	1	\$131.25	\$131.25	\$131.25	1.00
94710	ARTERIAL BLOOD GAS ANALYSES	1	1	0	1	\$7.09	\$7.09	\$7.09	1.00
94725	MEMBRANE DIFFUSION CAPACITY	1	1	0	1	\$10.24	\$10.24	\$10.24	1.00
94760	MEASURE BLOOD OXYGEN LEVEL	1	4	0	5	\$70.95	\$14.19	\$17.74	1.25
94762	MEASURE BLOOD OXYGEN LEVEL	1	1	0	15	\$2,175.00	\$145.00	\$2,175.00	15.00
94770	EXHALED CARBON DIOXIDE TEST	1	1	1	1	\$17.60	\$17.60	\$17.60	1.00
95125	IMMUNOTHERAPY, MANY ANTIGENS	1	1	1	2	\$0.00	\$0.00	\$0.00	2.00
95150	ANTIGEN THERAPY SERVICES	1	1	1	1	\$32.32	\$32.32	\$32.32	1.00
96425	CHEMOTHERAPY, INFUSION METHOD	1	12	8	12	\$1,649.60	\$137.47	\$137.47	1.00
97540	TRAINING FOR DAILY LIVING	1	1	0	15	\$1,478.76	\$98.58	\$1,478.76	15.00
99002	DEVICE HANDLING	1	1	0	23	\$223.00	\$9.70	\$223.00	23.00
99050	POST-OP FOLLOW-UP VISIT	1	1	0	2	\$100.00	\$50.00	\$100.00	2.00
99162	CRITICAL CARE, ADDED 30 MIN	1	1	0	4	\$430.40	\$107.60	\$430.40	4.00
99253	INITIAL INPATIENT CONSULT	1	2	0	3	\$354.20	\$118.07	\$177.10	1.50
99255	INITIAL INPATIENT CONSULT	1	2	0	2	\$385.80	\$192.90	\$192.90	1.00
99263	FOLLOW-UP INPATIENT CONSULT	1	2	0	2	\$180.00	\$90.00	\$90.00	1.00
99352	HOME VISIT, ESTAB PATIENT	1	1	2	2	\$134.40	\$67.20	\$134.40	2.00
TYPE		3,494		695		10,535		\$715,955.49	

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99070	SPECIAL SUPPLIES	47	391	0	4,682	\$255,512.11	\$54.57	\$653.48	11.97
84999	CLINICAL CHEMISTRY TEST	44	260	0	1,878	\$156,454.86	\$83.31	\$601.75	7.22
71020	CHEST X-RAY	43	127	0	149	\$3,498.34	\$23.48	\$27.55	1.17
76499	RADIOGRAPHIC PROCEDURE	34	90	0	235	\$41,695.01	\$177.43	\$463.28	2.61
90220	HOSPITAL CARE, NEW, COMPREH	32	84	2	86	\$10,533.13	\$122.48	\$125.39	1.02
90260	HOSPITAL VISIT, INTERMEDIATE	30	150	22	391	\$17,491.23	\$44.73	\$116.61	2.61
90015	OFFICE/OP VISIT, NEW, INTERM	28	94	151	297	\$23,304.57	\$78.47	\$247.92	3.16
90060	OFFICE/OP VISIT, EST, INTERM	28	90	99	102	\$3,318.06	\$32.53	\$36.87	1.13

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
71010	CHEST X-RAY	26	65	0	92	\$1,589.43	\$17.28	\$24.45	1.42
90270	HOSPITAL VISIT, EXTENDED	25	107	25	225	\$13,710.22	\$60.93	\$128.13	2.10
85095	BONE MARROW ASPIRATION	24	40	0	45	\$2,958.29	\$65.74	\$73.96	1.13
90250	HOSPITAL VISIT, LIMITED	23	75	14	281	\$11,367.51	\$40.45	\$151.57	3.75
90620	COMPREHENSIVE CONSULTATION	23	33	9	35	\$3,107.04	\$88.77	\$94.15	1.06
93010	ELECTROCARDIOGRAM REPORT	22	35	9	42	\$840.04	\$20.00	\$24.00	1.20
90292	HOSPITAL DISCHARGE DAY	21	57	0	60	\$3,354.36	\$55.91	\$58.85	1.05
85097	BONE MARROW INTERPRETATION	20	35	0	44	\$2,397.64	\$54.49	\$68.50	1.26
96410	CHEMOTHERAPY, INFUSION METHOD	20	102	36	211	\$13,304.89	\$63.06	\$130.44	2.07
36430	BLOOD TRANSFUSION SERVICE	19	92	0	161	\$6,957.65	\$43.22	\$75.63	1.75
85102	BONE MARROW BIOPSY	19	31	0	43	\$3,167.56	\$73.66	\$102.18	1.39
88313	SPECIAL STAINS	19	37	0	67	\$1,363.97	\$20.36	\$36.86	1.81
90782	INJECTION (SC)/(IM)	19	51	865	866	\$16,647.68	\$19.22	\$326.43	16.98
85105	BONE MARROW, INTERPRETATION	18	45	0	50	\$3,602.57	\$72.05	\$80.06	1.11
90050	OFFICE/OP VISIT, EST, LTD	17	50	61	61	\$1,803.72	\$29.57	\$36.07	1.22
38230	BONE MARROW COLLECTION	16	18	0	48	\$24,596.66	\$512.43	\$1,366.48	2.67
90215	HOSPITAL CARE, NEW, INTERMED	16	43	0	43	\$4,301.65	\$100.04	\$100.04	1.00
90515	EMERGENCY CARE, NEW, INTERMED	16	27	23	33	\$2,106.36	\$63.83	\$78.01	1.22
93307	ECHO EXAM OF HEART	16	27	9	28	\$4,167.42	\$148.84	\$154.35	1.04
88305	TISSUE EXAM BY PATHOLOGIST	15	25	0	35	\$2,975.75	\$85.02	\$119.03	1.40
99199	SPECIAL SERVICE OR REPORT	15	37	0	96	\$5,561.41	\$57.93	\$150.31	2.59
36491	INSERTION OF CATHETER, VEIN	14	16	0	19	\$6,918.34	\$364.12	\$432.40	1.19
74160	CONTRAST CAT SCAN OF ABDOMEN	14	18	0	19	\$2,545.12	\$133.95	\$141.40	1.06
85100	BONE MARROW EXAMINATION	14	24	0	25	\$2,366.99	\$94.68	\$98.62	1.04
88311	DECALCIFY TISSUE	13	21	0	26	\$370.27	\$14.24	\$17.63	1.24
90600	LIMITED CONSULTATION	13	16	7	16	\$743.62	\$46.48	\$46.48	1.00
90040	OFFICE/OP VISIT, EST, BRIEF	12	23	26	27	\$692.63	\$25.65	\$30.11	1.17
90630	COMPLEX CONSULTATION	12	15	5	15	\$1,554.38	\$103.63	\$103.63	1.00
71260	CONTRAST CAT SCAN OF CHEST	11	14	0	14	\$1,554.63	\$111.05	\$111.05	1.00
74150	CAT SCAN OF ABDOMEN	11	19	0	27	\$3,794.53	\$140.54	\$199.71	1.42
85025	AUTOMATED HEMOGRAM	11	27	0	49	\$532.21	\$10.86	\$19.71	1.81
88304	TISSUE EXAM BY PATHOLOGIST	11	19	0	20	\$1,190.17	\$59.51	\$62.64	1.05
90070	OFFICE/OP VISIT, EST, EXTEND	11	12	17	17	\$769.32	\$45.25	\$64.11	1.42
99160	CRITICAL CARE, EACH HOUR	11	101	1	102	\$28,325.88	\$277.70	\$280.45	1.01
78306	NUCLEAR SCAN OF SKELETON	10	18	0	18	\$2,407.50	\$133.75	\$133.75	1.00
90780	IV INFUSION THERAPY, 1 HOUR	10	43	101	111	\$9,875.01	\$88.96	\$229.65	2.58
70220	X-RAY EXAM OF SINUSES	9	14	0	14	\$442.08	\$31.58	\$31.58	1.00
85023	AUTOMATED HEMOGRAM	9	19	0	23	\$522.21	\$22.70	\$27.48	1.21
88312	SPECIAL STAINS	9	12	0	22	\$478.87	\$21.77	\$39.91	1.83
90605	INTERMEDIATE CONSULTATION	9	13	7	13	\$580.85	\$44.68	\$44.68	1.00
96549	CHEMOTHERAPY, UNSPECIFIED	9	13	122	126	\$9,334.64	\$74.08	\$718.05	9.69
99232	SUBSEQUENT HOSPITAL CARE	9	34	3	75	\$3,930.49	\$52.41	\$115.60	2.21
36489	INSERTION OF CATHETER, VEIN	8	12	0	13	\$2,524.43	\$194.19	\$210.37	1.08
72193	CONTRAST CAT SCAN OF PELVIS	8	8	0	8	\$964.48	\$120.56	\$120.56	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
76700	ECHO EXAM OF ABDOMEN	8	9	0	10	\$945.16	\$94.52	\$105.02	1.11
80500	LAB PATHOLOGY CONSULTATION	8	12	0	20	\$658.11	\$32.91	\$54.84	1.67
85060	BLOOD SMEAR INTERPRETATION	8	17	0	17	\$416.47	\$24.50	\$24.50	1.00
87040	BLOOD CULTURE FOR BACTERIA	8	15	0	29	\$862.17	\$29.73	\$57.48	1.93
88307	TISSUE EXAM BY PATHOLOGIST	8	11	0	22	\$2,845.28	\$129.33	\$258.66	2.00
90020	OFFICE/OP VISIT, NEW, COMPRH	8	9	10	10	\$804.12	\$80.41	\$89.35	1.11
90030	OFFICE/OP VISIT, EST, MINIM	8	27	52	53	\$646.36	\$12.20	\$23.94	1.96
90080	OFFICE/OP VISIT, EST, COMPRH	8	24	29	24	\$1,620.13	\$67.51	\$67.51	1.00
90610	EXTENDED CONSULTATION	8	13	6	13	\$958.23	\$73.71	\$73.71	1.00
90784	INJECTION (IV)	8	24	66	75	\$1,225.24	\$16.34	\$51.05	3.13
98412	CHEMOTHERAPY, INFUSION METHOD	8	26	22	47	\$3,218.29	\$68.47	\$123.78	1.81
96545	PROVIDE CHEMOTHERAPY AGENT	8	17	62	63	\$2,718.58	\$43.15	\$159.92	3.71
99214	OFFICE/OUTPATIENT VISIT, EST	8	26	22	26	\$1,199.64	\$46.14	\$46.14	1.00
99223	INITIAL HOSPITAL CARE	8	17	0	17	\$2,119.00	\$124.65	\$124.65	1.00
99231	SUBSEQUENT HOSPITAL CARE	8	17	3	51	\$2,176.11	\$42.67	\$128.01	3.00
81000	URINALYSIS WITH MICROSCOPY	7	13	0	14	\$73.94	\$5.28	\$5.69	1.08
85103	BONE MARROW BIOPSY & EXAM	7	11	0	12	\$560.23	\$40.02	\$50.93	1.27
88104	MICROSCOPIC EXAM OF CELLS	7	12	0	14	\$409.62	\$34.14	\$34.14	1.00
90240	HOSPITAL VISIT, BRIEF	7	11	0	43	\$1,484.22	\$34.52	\$134.93	3.91
93320	DOPPLER ECHO EXAM, HEART	7	10	4	10	\$760.23	\$76.02	\$76.02	1.00
96450	CHEMOTHERAPY, INTO CNS	7	17	10	19	\$2,006.07	\$105.58	\$118.00	1.12
99238	HOSPITAL DISCHARGE DAY	7	20	0	20	\$1,192.62	\$59.63	\$59.63	1.00
36415	DRAWING BLOOD	6	14	0	15	\$75.71	\$5.05	\$5.41	1.07
62270	SPINAL FLUID TAP, DIAGNOSTIC	6	14	0	14	\$1,403.70	\$100.26	\$100.26	1.00
70450	CAT SCAN OF HEAD OR BRAIN	6	8	0	13	\$2,551.61	\$196.28	\$318.95	1.63
71250	CAT SCAN OF CHEST	6	20	0	21	\$4,000.30	\$190.49	\$200.02	1.05
77263	RADIATION THERAPY PLANNING	6	6	0	6	\$2,042.97	\$340.50	\$340.50	1.00
77290	SET RADIATION THERAPY FIELD	6	7	0	8	\$1,580.83	\$197.60	\$225.83	1.14
85024	AUTOMATED HEMOGRAM	6	8	0	10	\$156.25	\$15.63	\$19.53	1.25
85595	ELECTRONIC PLATELET COUNT	6	18	0	23	\$441.25	\$19.18	\$24.51	1.28
88262	CHROMOSOME COUNT: 15-20 CELLS	6	16	0	33	\$251.89	\$7.63	\$15.74	2.06
88342	IMMUNOCYTOCHEMISTRY	6	7	0	7	\$1,110.20	\$158.60	\$158.60	1.00
90200	HOSPITAL CARE, NEW, BRIEF	6	7	0	15	\$630.40	\$35.36	\$75.77	2.14
90280	HOSPITAL VISIT, COMPREHENSIVE	6	8	0	8	\$642.58	\$80.32	\$80.32	1.00
90510	EMERGENCY CARE, NEW, LIMITED	6	36	1	59	\$6,066.80	\$102.83	\$168.52	1.64
90517	EMERGENCY CARE, NEW, EXTEND	6	8	8	8	\$402.60	\$50.33	\$50.33	1.00
90641	LIMITED FOLLOW-UP CONSULT	6	6	7	6	\$694.20	\$115.70	\$115.70	1.00
94010	BREATHING CAPACITY TEST	6	10	8	13	\$542.00	\$41.69	\$54.20	1.30
96530	PUMP REFILLING, MAINTENANCE	6	6	4	6	\$179.76	\$29.96	\$29.96	1.00
99173	CRITICAL CARE, FOLLOW-UP	6	61	61	62	\$3,423.04	\$55.21	\$56.12	1.02
99213	OFFICE/OUTPATIENT VISIT, EST	6	12	6	32	\$3,799.99	\$118.75	\$316.67	2.67
99233	SUBSEQUENT HOSPITAL CARE	6	12	12	12	\$297.24	\$24.77	\$24.77	1.00
36495	IMPLANT INFUSION PUMP	5	29	0	46	\$2,138.01	\$46.48	\$73.72	1.59
		5	5	0	7	\$3,958.70	\$565.53	\$791.74	1.40

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
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HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPI RATIO
38265	CONTRAST CAT SCANS OF HEAD	5	5	0	8	\$6,528.02	\$816.00	\$1,305.60	1.60
70470	MAGNETIC IMAGE, BRAIN (MRI)	5	6	0	6	\$822.83	\$137.14	\$137.14	1.00
70551	CAT SCAN OF PELVIS	5	8	0	27	\$2,742.35	\$101.57	\$342.79	3.38
72192	X-RAY EXAM OF ABDOMEN	5	7	0	7	\$939.16	\$134.17	\$134.17	1.00
74000	RADIATION THERAPY DOSE PLAN	5	6	0	6	\$151.50	\$25.25	\$25.25	1.00
77300	RADIATION THERAPY MANAGEMENT	5	9	0	51	\$6,779.40	\$78.20	\$104.27	1.33
77499	NUCLEAR SCAN, HEART MUSCLE	5	6	0	4	\$513.60	\$128.40	\$85.60	0.67
78472	NUCLEAR DIAGNOSTIC EXAM	5	6	0	8	\$2,736.40	\$342.05	\$456.07	1.33
78999	7 CLINICAL CHEMISTRY TESTS	5	8	0	9	\$204.40	\$22.71	\$25.55	1.13
80007	19 OR MORE BLOOD/URINE TESTS	5	9	0	9	\$220.62	\$24.51	\$24.51	1.00
80019	DIFFERENTIAL WBC COUNT	5	29	0	48	\$276.75	\$5.77	\$9.54	1.66
85007	AUTOMATED HEMOGRAM	5	7	0	7	\$75.30	\$10.76	\$10.76	1.00
85021	THROMBOPLASTIN TIME, PARTIAL	5	6	0	6	\$86.80	\$14.47	\$14.47	1.00
85730	IMMUNOASSAY, INFECTIOUS AGENT	5	9	0	9	\$106.26	\$11.81	\$11.81	1.00
86317	MICROSCOPIC EXAM OF CELLS	5	8	0	9	\$180.68	\$20.08	\$22.58	1.13
88106	IMMUNOFLUORESCENT STUDY	5	5	0	6	\$71.53	\$11.92	\$14.31	1.20
88346	PSYCHOTHERAPY, 45-50 MIN	5	10	12	18	\$1,157.88	\$64.33	\$115.79	1.80
90844	ECHO EXAM OF HEART	5	7	4	7	\$499.30	\$71.33	\$71.33	1.00
93308	DOPPLER COLOR FLOW	5	6	2	6	\$338.00	\$56.33	\$56.33	1.00
93325	CONFERENCE WITH PHYSICIAN	5	6	0	6	\$304.11	\$50.69	\$50.69	1.00
98900	CONFERENCE WITH PHYSICIAN	5	6	4	6	\$83.00	\$80.50	\$80.50	1.00
98902	INITIAL HOSPITAL CARE	5	7	1	7	\$914.63	\$130.66	\$130.66	1.00
99222	BIOPSY OF SKIN LESION	4	4	0	4	\$233.60	\$58.40	\$58.40	1.00
11100	BONE BIOPSY, TROCER/NEEDLE	4	5	0	12	\$1,873.22	\$156.10	\$374.64	2.40
20220	INSERTION OF CATHETER, VEIN	4	4	0	10	\$2,342.70	\$234.27	\$585.68	2.50
36490	REMOVE INFUSION PUMP	4	4	0	3	\$1,982.60	\$660.87	\$495.65	0.75
36497	VASCULAR SURGERY PROCEDURE	4	5	0	5	\$1,478.00	\$295.60	\$295.60	1.00
37799	EXPLORE ADRENAL GLAND	4	4	0	5	\$7,116.88	\$1,423.38	\$1,779.22	1.25
60545	X-RAY EXAM OF ABDOMEN	4	4	0	4	\$131.84	\$32.96	\$32.96	1.00
74020	X-RAY EXAM SERIES, ABDOMEN	4	5	0	5	\$185.62	\$37.12	\$37.12	1.00
74022	MAGNETIC IMAGE, ABDOMEN	4	5	0	5	\$1,511.40	\$302.28	\$302.28	1.00
74170	MAGNETIC IMAGE, ABDOMEN(MRI)	4	7	0	7	\$3,003.80	\$429.11	\$429.11	1.00
74181	CAT SCANS, OTHER PLANES	4	4	0	8	\$204.59	\$25.57	\$51.15	2.00
76375	ECHO EXAM ABDOMEN BACK WALL	4	4	0	4	\$383.73	\$95.93	\$95.93	1.00
76770	SPECIAL RADIATION DOSIMETRY	4	4	0	4	\$226.37	\$56.59	\$56.59	1.00
77331	RADIATION PHYSICS CONSULT	4	5	0	5	\$378.40	\$75.68	\$75.68	1.00
77336	DAILY RADIATION THERAPY	4	25	0	36	\$3,378.65	\$93.85	\$135.15	1.44
77410	WEEKLY RADIATION THERAPY	4	4	0	9	\$1,372.56	\$152.51	\$343.14	2.25
77430	17-18 BLOOD/URINE TESTS	4	8	0	15	\$452.95	\$30.20	\$56.62	1.88
80018	AUTOMATED HEMOGRAM	4	29	0	45	\$543.90	\$12.09	\$18.76	1.55
85022	RETICULOCYTE COUNT	4	4	0	5	\$52.96	\$10.59	\$13.24	1.25
85044	PROTHROMBIN TIME	4	4	0	4	\$35.80	\$8.95	\$8.95	1.00
85610	BLOOD COMPATIBILITY TEST	4	4	0	11	\$164.96	\$15.00	\$41.24	2.75

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
88237	TISSUE CULTURE, BONE MARROW	4	6	0	8	\$458.00	\$57.25	\$76.33	1.33
89399	PATHOLOGY LAB PROCEDURE	4	4	0	6	\$1,428.00	\$238.00	\$357.00	1.50
90150	HOME VISIT, LIMITED	4	8	17	17	\$1,319.98	\$77.65	\$165.00	2.13
93000	ELECTROCARDIOGRAM, COMPLETE	4	5	5	5	\$186.30	\$37.26	\$37.26	1.00
94799	PULMONARY SERVICE/PROCEDURE	4	4	8	8	\$980.10	\$122.51	\$245.03	2.00
96408	CHEMOTHERAPY, PUSH TECHNIQUE	4	11	11	13	\$536.36	\$41.26	\$48.76	1.18
99000	SPECIMEN HANDLING	4	5	0	5	\$79.89	\$15.98	\$15.98	1.00
99255	INITIAL INPATIENT CONSULT	4	4	0	2	\$324.95	\$162.48	\$81.24	0.50
20240	BONE BIOPSY, EXCISIONAL	3	9	0	10	\$1,406.00	\$140.60	\$156.22	1.11
32000	DRAINAGE OF CHEST	3	3	0	4	\$2,799.31	\$699.83	\$933.10	1.33
36000	PLACE NEEDLE IN VEIN	3	7	0	7	\$462.65	\$66.09	\$66.09	1.00
36406	DRAWING BLOOD	3	3	0	3	\$219.05	\$73.02	\$73.02	1.00
36410	DRAWING BLOOD	3	7	0	8	\$165.18	\$20.65	\$23.60	1.14
36488	INSERTION OF CATHETER, VEIN	3	3	0	3	\$697.40	\$232.47	\$232.47	1.00
70210	X-RAY EXAM OF SINUSES	3	3	0	3	\$19.19	\$19.19	\$19.19	1.00
71270	CONTRAST CAT SCANS OF CHEST	3	3	0	3	\$1,138.20	\$379.40	\$379.40	1.00
73590	X-RAY EXAM OF LOWER LEG	3	5	0	5	\$165.81	\$33.16	\$33.16	1.00
74010	X-RAY EXAM OF ABDOMEN	3	3	0	3	\$70.19	\$23.40	\$23.40	1.00
76000	FLUOROSCOPE EXAMINATION	3	4	0	4	\$139.38	\$34.85	\$34.85	1.00
76140	X-RAY CONSULTATION	3	3	0	110	\$328.00	\$2.98	\$109.33	36.67
76705	ECHO EXAM OF ABDOMEN	3	4	0	4	\$245.58	\$61.40	\$61.40	1.00
77280	SET RADIATION THERAPY FIELD	3	3	0	4	\$427.17	\$106.79	\$142.39	1.33
77285	SET RADIATION THERAPY FIELD	3	4	0	4	\$805.00	\$201.25	\$201.25	1.00
77334	RADIATION TREATMENT AID(S)	3	3	0	5	\$671.17	\$134.23	\$223.72	1.67
77400	DAILY RADIATION THERAPY	3	8	0	24	\$910.03	\$37.92	\$113.75	3.00
77415	PORT VERIFICATION FILMS	3	8	0	10	\$341.20	\$34.12	\$42.65	1.25
77420	WEEKLY RADIATION THERAPY	3	4	0	9	\$544.10	\$60.46	\$136.03	2.25
77470	SPECIAL RADIATION TREATMENT	3	9	0	24	\$877.85	\$36.58	\$97.54	2.67
85109	BONE MARROW PREPARATION	3	5	0	8	\$185.47	\$23.18	\$37.09	1.60
85580	BLOOD PLATELET COUNT	3	20	0	24	\$344.63	\$14.36	\$17.23	1.20
85651	RBC SEDIMENTATION RATE	3	3	0	3	\$46.50	\$15.50	\$15.50	1.00
86082	BLOOD TYPING, ABO & RHO(D)	3	4	0	6	\$58.99	\$9.83	\$14.75	1.50
86813	HLA TYPING, A, B, AND/OR C	3	3	0	7	\$1,498.65	\$214.09	\$499.55	2.33
87184	ANTIBIOTIC SENSITIVITY, EACH	3	3	0	3	\$60.50	\$20.17	\$20.17	1.00
88160	CYTOPATHOLOGY	3	3	0	3	\$50.50	\$16.83	\$16.83	1.00
88180	CELL MARKER STUDY	3	5	0	56	\$1,642.04	\$29.32	\$328.41	11.20
88302	TISSUE EXAM BY PATHOLOGIST	3	4	0	5	\$216.00	\$43.20	\$54.00	1.25
88309	TISSUE EXAM BY PATHOLOGIST	3	5	0	6	\$834.50	\$139.08	\$166.90	1.20
88331	PATHOLOGY CONSULT IN SURGERY	3	3	0	3	\$283.41	\$94.47	\$94.47	1.00
90640	BRIEF FOLLOW-UP CONSULT	3	4	3	4	\$322.80	\$23.08	\$23.08	1.00
90642	INTERMEDIATE FOLLOWUP CONSULT	3	5	3	7	\$98.06	\$19.61	\$19.61	1.00
92567	TYMPANOMETRY	3	5	5	5	\$747.20	\$186.80	\$186.80	1.00
93799	CARDIOVASCULAR PROCEDURE	3	4	2	4	\$47.31	\$15.77	\$15.77	1.00
94720	MONOXIDE DIFFUSING CAPACITY	3	3	3	3				

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDB)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
99054	MEDICAL SERVICES, UNUSUAL HRS	3	6	0	10	\$265.85	\$26.58	\$44.31	1.67
99174	CRITICAL CARE, FOLLOW-UP	3	4	1	9	\$1,103.94	\$122.66	\$275.99	2.25
99254	INITIAL INPATIENT CONSULT	3	3	1	3	\$72.77	\$24.26	\$24.26	1.00
99283	EMERGENCY DEPT VISIT	3	3	2	3	\$233.29	\$77.76	\$77.76	1.00
19240	REMOVAL OF BREAST	2	2	0	2	\$3,465.40	\$1,732.70	\$1,732.70	1.00
20245	BONE BIOPSY, EXCISIONAL	2	2	0	13	\$1,246.00	\$95.85	\$623.00	6.50
31622	DIAGNOSTIC BRONCHOSCOPY	2	2	0	2	\$751.40	\$375.70	\$375.70	1.00
36010	PLACE CATHETER IN VEIN	2	2	0	3	\$1,334.00	\$444.67	\$667.00	1.50
36405	DRAWING BLOOD	2	2	0	2	\$83.70	\$41.85	\$41.85	1.00
36520	PLASMA AND/OR CELL EXCHANGE	2	3	0	5	\$2,102.35	\$420.47	\$700.78	1.67
38500	BIOPSY/REMOVAL, LYMPH NODE(S)	2	2	0	2	\$357.38	\$178.69	\$178.69	1.00
43239	UPPER GI ENDOSCOPY, BIOPSY	2	2	0	2	\$394.10	\$197.05	\$197.05	1.00
49000	EXPLORATION OF ABDOMEN	2	2	0	3	\$2,184.44	\$728.15	\$1,092.22	1.50
58120	EXPLORATION AND CURETTAGE (D&C)	2	3	0	4	\$800.20	\$200.05	\$266.73	1.33
60540	DILATE ADRENAL GLAND	2	2	0	2	\$2,860.00	\$1,430.00	\$1,430.00	1.00
70250	X-RAY EXAM OF SKULL	2	2	0	2	\$46.80	\$23.40	\$23.40	1.00
70486	CAT SCAN OF FACE, JAW	2	2	0	2	\$219.80	\$109.90	\$109.90	1.00
70487	CONTRAST CAT SCAN, FACE/JAW	2	2	0	2	\$177.10	\$88.55	\$88.55	1.00
70552	MAGNETIC IMAGE, BRAIN (MRI)	2	3	0	3	\$632.00	\$210.67	\$210.67	1.00
72070	X-RAY EXAM OF THORAX SPINE	2	2	0	2	\$50.70	\$25.35	\$25.35	1.00
72100	X-RAY EXAM OF LOWER SPINE	2	2	0	2	\$37.55	\$18.78	\$18.78	1.00
72141	MAGNETIC IMAGE, NECK SPINE	2	3	0	3	\$1,014.81	\$338.27	\$338.27	1.00
72146	MAGNETIC IMAGE, CHEST SPINE	2	2	0	3	\$1,003.94	\$334.65	\$501.97	1.50
72148	MAGNETIC IMAGE, LUMBAR SPINE	2	2	0	2	\$512.10	\$256.05	\$256.05	1.00
72196	MAGNETIC IMAGE, PELVIS	2	2	0	3	\$325.40	\$108.47	\$162.70	1.50
73110	X-RAY EXAM OF WRIST	2	2	0	2	\$41.45	\$20.73	\$20.73	1.00
74220	CONTRAST XRAY EXAM, ESOPHAGUS	2	2	0	2	\$69.90	\$34.95	\$34.95	1.00
76062	X-RAYS, BONE SURVEY	2	2	0	2	\$238.70	\$119.35	\$119.35	1.00
77262	RADIATION THERAPY PLANNING	2	2	0	2	\$569.00	\$284.50	\$284.50	1.00
77305	RADIATION THERAPY DOSE PLAN	2	2	0	2	\$173.20	\$86.60	\$86.60	1.00
77332	RADIATION TREATMENT AID(S)	2	3	0	3	\$198.40	\$66.13	\$66.13	1.00
77333	RADIATION TREATMENT AID(S)	2	3	0	3	\$289.00	\$96.33	\$96.33	1.00
77370	RADIATION PHYSICS CONSULT	2	2	0	2	\$578.00	\$289.00	\$289.00	1.00
77403	RADIATION TREATMENT DELIVERY	2	6	0	13	\$908.86	\$69.91	\$151.48	2.17
77405	DAILY RADIATION THERAPY	2	11	0	25	\$2,420.00	\$96.80	\$220.00	2.27
78471	NUCLEAR SCAN, HEART MUSCLE	2	2	0	2	\$187.80	\$93.90	\$93.90	1.00
80004	4 CLINICAL CHEMISTRY TESTS	2	3	0	5	\$49.65	\$9.93	\$16.55	1.67
80012	12 CLINICAL CHEMISTRY TESTS	2	2	0	2	\$23.67	\$11.84	\$11.84	1.00
80016	13-16 BLOOD/URINE TESTS	2	10	0	10	\$207.22	\$20.72	\$20.72	1.00
82575	CREATININE CLEARANCE TEST	2	2	0	2	\$22.45	\$11.23	\$11.23	1.00
82977	ASSAY OF GGT ENZYME	2	2	0	4	\$38.60	\$9.65	\$19.30	2.00
83735	ASSAY BLOOD MAGNESIUM	2	2	0	20	\$213.77	\$10.69	\$15.27	1.43
84132	ASSAY BLOOD POTASSIUM	2	2	0	3	\$17.00	\$5.67	\$8.50	1.50
84460	UV-ASSAY TRANSAMINASE (SGPT)	2	3	0	4	\$49.00	\$12.25	\$16.33	1.33

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)

HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
85029	AUTOMATED HEMOGRAM	2	5	0	5	\$16.18	\$3.24	\$3.24	1.00
85590	PLATELET PHASE MICROSCOPY	2	5	0	5	\$56.40	\$11.28	\$11.28	1.00
85667	T-CELL DEPLETION	2	2	0	2	\$2,025.00	\$1,012.50	\$1,012.50	1.00
85999	HEMATOLOGY PROCEDURE	2	3	0	5	\$53.50	\$10.70	\$17.83	1.67
86080	BLOOD TYPING, ABO ONLY	2	3	0	7	\$94.60	\$13.51	\$31.53	2.33
86256	FLUORESCENT ANTIBODY; TITER	2	2	0	2	\$32.50	\$16.25	\$16.25	1.00
86289	HEPATITIS BC ANTIBODY TEST	2	2	0	2	\$50.42	\$25.21	\$25.21	1.00
86342	IRRADIATION OF BLOOD PRODUCT	2	2	0	2	\$68.11	\$34.06	\$34.06	1.00
86817	HLA TYPING, DR	2	2	0	6	\$2,234.13	\$372.36	\$1,117.07	3.00
86999	IMMUNOLOGY PROCEDURE	2	3	0	11	\$2,376.40	\$216.04	\$792.13	3.67
87086	URINE CULTURE, COLONY COUNT	2	2	0	3	\$110.90	\$36.97	\$55.45	1.50
87250	VIRUS INOCULATION FOR TEST	2	4	0	8	\$155.00	\$19.38	\$38.75	2.00
87252	VIRUS INOCULATION FOR TEST	2	2	0	4	\$158.16	\$39.54	\$79.08	2.00
88107	MICROSCOPIC EXAM OF CELLS	2	7	0	8	\$234.15	\$29.27	\$33.45	1.14
88230	TISSUE CULTURE, LYMPHOCYTE	2	2	0	2	\$185.40	\$92.70	\$92.70	1.00
88321	MICROSLIDE CONSULTATION	2	2	0	6	\$243.04	\$40.51	\$121.52	3.00
88323	MICROSLIDE CONSULTATION	2	2	0	2	\$93.36	\$46.68	\$46.68	1.00
90160	HOME VISIT, INTERMED	2	8	11	11	\$907.00	\$82.45	\$113.38	1.38
90560	EMERGENCY CARE, INTERMEDIATE	2	2	1	2	\$81.63	\$40.82	\$40.82	1.00
90643	COMPLEX FOLLOW-UP CONSULT	2	2	0	2	\$128.30	\$64.15	\$64.15	1.00
90781	IV INFUSION, ADDITIONAL HOUR	2	11	18	18	\$1,037.94	\$57.66	\$94.36	1.64
90799	THERAPEUTIC/DIAG INJECTION	2	3	28	25	\$67.80	\$2.71	\$22.60	8.33
90801	PSYCHIATRIC INTERVIEW	2	2	1	2	\$174.42	\$87.21	\$87.21	1.00
90843	PSYCHOTHERAPY, 20-30 MIN	2	3	2	3	\$148.70	\$49.57	\$49.57	1.00
92582	CONDITIONING PLAY AUDIOMETRY	2	2	2	2	\$103.24	\$51.62	\$51.62	1.00
93312	ECHO EXAM OF HEART	2	2	1	2	\$130.00	\$65.00	\$65.00	1.00
94200	LUNG FUNCTION TEST (MBC/MVV)	2	2	3	3	\$23.67	\$7.89	\$11.84	1.50
94700	BLOOD GAS ANALYSIS	2	3	1	3	\$92.61	\$30.87	\$30.87	1.00
94762	MEASURE BLOOD OXYGEN LEVEL	2	2	0	7	\$678.50	\$96.93	\$339.25	3.50
95819	ELECTROENCEPHALGRAM (EEG)	2	2	0	2	\$127.95	\$63.98	\$63.98	1.00
96400	CHEMOTHERAPY, (SC)/(IM)	2	8	11	11	\$417.00	\$37.91	\$52.13	1.38
96520	PUMP REFILLING, MAINTENANCE	2	4	4	4	\$108.00	\$27.00	\$27.00	1.00
99001	SPECIMEN HANDLING	2	2	0	2	\$12.95	\$6.48	\$6.48	1.00
99082	UNUSUAL PHYSICIAN TRAVEL	2	2	0	10	\$391.99	\$39.20	\$196.00	5.00
99150	PROLONGED MD ATTENDANCE	2	33	0	39	\$5,316.48	\$136.32	\$161.11	1.18
99212	OFFICE/OUTPATIENT VISIT, EST	2	2	1	2	\$55.40	\$27.70	\$27.70	1.00
99244	OFFICE CONSULTATION	2	4	3	4	\$399.17	\$99.79	\$99.79	1.00
99251	INITIAL INPATIENT CONSULT	2	2	0	2	\$105.60	\$52.80	\$52.80	1.00
99253	INITIAL INPATIENT CONSULT	2	2	0	2	\$162.30	\$81.15	\$81.15	1.00
99351	HOME VISIT, ESTAB PATIENT	2	3	17	17	\$968.20	\$56.95	\$322.73	5.67
99352	HOME VISIT, ESTAB PATIENT	2	2	2	2	\$108.75	\$54.38	\$54.38	1.00
11443	REMOVAL OF SKIN LESION	1	1	0	1	\$184.80	\$184.80	\$184.80	1.00
19120	REMOVAL OF BREAST LESION	1	1	0	1	\$379.92	\$379.92	\$379.92	1.00
19180	REMOVAL OF BREAST	1	1	0	1	\$161.60	\$161.60	\$161.60	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
21899	NECK/CHEST SURGERY PROCEDURE	1	1	0	4	\$224.00	\$56.00	\$224.00	4.00
28080	REMOVAL OF FOOT LESION	1	1	0	1	\$269.10	\$269.10	\$269.10	1.00
28260	RELEASE OF MIDFOOT JOINT	1	1	0	1	\$799.00	\$799.00	\$799.00	1.00
30300	REMOVE NASAL FOREIGN BODY	1	1	0	1	\$60.00	\$60.00	\$60.00	1.00
31020	EXPLORATION MAXILLARY SINUS	1	1	0	2	\$717.60	\$358.80	\$717.60	2.00
31250	NASAL ENDOSCOPY, DIAGNOSTIC	1	2	0	2	\$671.84	\$335.92	\$335.92	1.00
31541	OPERATIVE LARYNGOSCOPY	1	1	0	1	\$757.50	\$757.50	\$757.50	1.00
31625	BRONCHOSCOPY WITH BIOPSY	1	1	0	1	\$360.60	\$360.60	\$360.60	1.00
31628	BRONCHOSCOPY WITH BIOPSY	1	1	0	2	\$1,144.00	\$572.00	\$1,144.00	2.00
36200	PLACE CATHETER IN AORTA	1	1	0	1	\$140.95	\$140.95	\$140.95	1.00
36299	VESSEL INJECTION PROCEDURE	1	1	0	0	\$28.00		\$28.00	0.00
36400	DRAWING BLOOD	1	1	0	4	\$120.00	\$30.00	\$120.00	4.00
36440	BLOOD TRANSFUSION SERVICE	1	1	0	1	\$31.50	\$31.50	\$31.50	1.00
36535	REMOVAL OF ACCESS PORT	1	1	0	1	\$206.70	\$206.70	\$206.70	1.00
36600	WITHDRAWAL OF ARTERIAL BLOOD	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00
36620	INSERTION CATHETER, ARTERY	1	1	0	1	\$106.50	\$106.50	\$106.50	1.00
36800	INSERTION OF CANNULA	1	1	0	1	\$413.60	\$413.60	\$413.60	1.00
37202	TRANSCATHETER THERAPY INFUSE	1	1	0	1	\$495.50	\$495.50	\$495.50	1.00
38250		1	1	0	1	\$450.00	\$450.00	\$450.00	1.00
38255		1	1	0	6	\$650.00	\$108.33	\$650.00	6.00
38510	BIOPSY/REMOVAL, LYMPH NODE(S)	1	1	0	1	\$312.00	\$312.00	\$312.00	1.00
38530	BIOPSY/REMOVAL, LYMPH NODE(S)	1	1	0	1	\$327.24	\$327.24	\$327.24	1.00
38999	BLOOD/LYMPH SYSTEM PROCEDURE	1	1	0	2	\$1,807.40	\$903.70	\$1,807.40	2.00
42100	BIOPSY ROOF OF MOUTH	1	1	0	1	\$46.71	\$46.71	\$46.71	1.00
42830	REMOVAL OF ADENOIDS	1	1	0	1	\$341.50	\$341.50	\$341.50	1.00
43246	PLACE GASTROSTOMY TUBE	1	2	0	3	\$1,686.00	\$562.00	\$843.00	1.50
43760	CHANGE GASTROSTOMY TUBE	1	1	0	1	\$119.30	\$119.30	\$119.30	1.00
43830	PLACE GASTROSTOMY TUBE	1	1	0	1	\$678.30	\$678.30	\$678.30	1.00
46040	INCISION OF RECTAL ABSCESS	1	1	0	1	\$256.00	\$256.00	\$256.00	1.00
46600	DIAGNOSTIC ANOSCOPY	1	1	0	1	\$40.40	\$40.40	\$40.40	1.00
49010	EXPLORATION BEHIND ABDOMEN	1	2	0	3	\$1,924.22	\$641.41	\$962.11	1.50
49020	DRAIN ABDOMINAL ABSCESS	1	1	0	1	\$934.80	\$934.80	\$934.80	1.00
49180	BIOPSY, ABDOMINAL MASS	1	1	0	1	\$207.20	\$207.20	\$207.20	1.00
49200	REMOVAL OF ABDOMINAL LESION	1	1	0	1	\$1,134.00	\$1,134.00	\$1,134.00	1.00
49201	REMOVAL OF ABDOMINAL LESION	1	1	0	41	\$4,405.00	\$107.44	\$4,405.00	41.00
49220	MULTIPLE SURGERY, ABDOMEN	1	1	0	3	\$3,286.60	\$1,095.53	\$3,286.60	3.00
49505	REPAIR INGUINAL HERNIA	1	1	0	4	\$1,517.20	\$379.30	\$1,517.20	4.00
53670	INSERT URINARY CATHETER	1	1	0	1	\$21.00	\$21.00	\$21.00	1.00
57120	CLOSURE OF VAGINA	1	1	0	2	\$150.00	\$75.00	\$150.00	2.00
60550		1	1	0	2	\$2,726.00	\$1,363.00	\$2,726.00	2.00
62272	DRAIN SPINAL FLUID	1	1	0	2	\$231.75	\$115.88	\$231.75	2.00
62289	INJECTION INTO SPINAL CANAL	1	1	0	1	\$210.00	\$210.00	\$210.00	1.00
64999	NERVOUS SYSTEM SURGERY	1	20	0	19	\$5,714.14	\$300.74	\$285.71	0.95
67108	REPAIR DETACHED RETINA	1	1	0	1	\$784.01	\$784.01	\$784.01	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
69436	CREATE EARDRUM OPENING	1	1	0	1	\$430.00	\$430.00	\$430.00	1.00
70200	X-RAY EXAM OF EYE SOCKETS	1	1	0	1	\$29.30	\$29.30	\$29.30	1.00
70355	PANORAMIC X-RAY OF JAWS	1	1	0	1	\$30.00	\$30.00	\$30.00	1.00
70360	X-RAY EXAM OF NECK	1	1	0	1	\$12.75	\$12.75	\$12.75	1.00
70460	CONTRAST CAT SCAN OF HEAD	1	1	0	1	\$207.10	\$207.10	\$207.10	1.00
70480	CAT SCAN OF SKULL	1	2	0	2	\$198.50	\$99.25	\$99.25	1.00
70481	CONTRAST CAT SCAN OF SKULL	1	1	0	1	\$92.96	\$92.96	\$92.96	1.00
70482	CONTRAST CAT SCANS OF SKULL	1	1	0	1	\$178.20	\$178.20	\$178.20	1.00
70490	CAT SCAN OF NECK TISSUE	1	1	0	2	\$724.00	\$362.00	\$362.00	2.00
70491	CONTRAST CAT OF NECK TISSUE	1	1	0	1	\$125.00	\$125.00	\$125.00	1.00
70540	MAGNETIC IMAGE, FACE, NECK (MRI)	1	1	0	1	\$200.00	\$200.00	\$200.00	1.00
71015	CHEST X-RAY	1	1	0	1	\$36.00	\$36.00	\$36.00	1.00
71090	X-RAY & PACEMAKER INSERTION	1	1	0	1	\$30.30	\$30.30	\$30.30	1.00
71100	X-RAY EXAM OF RIBS	1	1	0	1	\$24.20	\$24.20	\$24.20	1.00
71111	X-RAY EXAM OF RIBS, CHEST	1	1	0	1	\$9.50	\$9.50	\$9.50	1.00
72040	X-RAY EXAM OF NECK SPINE	1	1	0	1	\$34.30	\$34.30	\$34.30	1.00
72142	MAGNETIC IMAGE, NECK SPINE	1	1	0	1	\$360.00	\$360.00	\$360.00	1.00
72149	MAGNETIC IMAGE, LUMBAR SPINE	1	1	0	1	\$350.00	\$350.00	\$350.00	1.00
72156	MAGNETIC IMAGE, SPINE (MRI)	1	1	0	1	\$1,082.40	\$1,082.40	\$1,082.40	1.00
72158	MAGNETIC IMAGE, SPINE (MRI)	1	1	0	1	\$1,082.40	\$1,082.40	\$1,082.40	1.00
72170	X-RAY EXAM OF PELVIS	1	1	0	1	\$14.18	\$14.18	\$14.18	1.00
72194	CONTRAST CAT SCANS OF PELVIS	1	1	0	1	\$715.00	\$715.00	\$715.00	1.00
73060	X-RAY EXAM OF HUMERUS	1	1	0	1	\$17.90	\$17.90	\$17.90	1.00
73550	X-RAY EXAM OF THIGH	1	1	0	2	\$36.40	\$18.20	\$36.40	2.00
73720	MAGNETIC IMAGE, LEG, FOOT	1	1	0	2	\$1,000.00	\$500.00	\$1,000.00	2.00
74240	X-RAY EXAM UPPER GI TRACT	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
74245	CONTRAST X-RAY URINARY TRACT	1	1	0	1	\$49.50	\$49.50	\$49.50	1.00
75625	CONTRAST X-RAY EXAM OF AORTA	1	1	0	1	\$150.00	\$150.00	\$150.00	1.00
75711	ARTERY X-RAYS, ARM/LEG	1	1	0	1	\$403.00	\$403.00	\$403.00	1.00
75823	VEIN X-RAY, ARMS/LEGS	1	1	0	1	\$169.80	\$169.80	\$169.80	1.00
75896	X-RAYS, TRANSCATHETER THERAPY	1	1	0	1	\$200.00	\$200.00	\$200.00	1.00
75961	TRANSCATHETER RETRIEVAL	1	1	0	1	\$1,000.00	\$1,000.00	\$1,000.00	1.00
75989	ABSCISS DRAINAGE UNDER X-RAY	1	1	0	1	\$142.84	\$142.84	\$142.84	1.00
76003	NEEDLE LOCALIZATION BY X-RAY	1	1	0	1	\$33.30	\$33.30	\$33.30	1.00
76066	JOINT(S) SURVEY, SINGLE FILM	1	1	0	1	\$41.00	\$41.00	\$41.00	1.00
76080	X-RAY EXAM OF FISTULA	1	1	0	1	\$87.04	\$87.04	\$87.04	1.00
76360	CAT SCAN FOR NEEDLE BIOPSY	1	1	0	1	\$40.80	\$40.80	\$40.80	1.00
76775	ECHO EXAM ABDOMEN BACK WALL	1	1	0	1	\$82.43	\$82.43	\$82.43	1.00
76818	FETAL BIOPHYSICAL PROFILE	1	1	0	1	\$69.30	\$69.30	\$69.30	1.00
76934	ECHO GUIDE FOR CHEST TAP	1	1	0	1	\$105.00	\$105.00	\$105.00	1.00
77261	RADIATION THERAPY PLANNING	1	1	0	1	\$94.05	\$94.05	\$94.05	1.00
77310	RADIATION THERAPY DOSE PLAN	1	1	0	1	\$167.20	\$167.20	\$167.20	2.00
77407	RADIATION TREATMENT DELIVERY	1	1	0	2				

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSP PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
77417	RADIOLOGY PORT FILM(S)	1	1	0	1	\$51.32	\$51.32	\$51.32	1.00
77425	WEEKLY RADIATION THERAPY	1	2	0	3	\$583.12	\$194.37	\$291.56	1.50
77762	RADIOELEMENT APPLICATION	1	2	0	2	\$392.76	\$196.38	\$196.38	1.00
77763	RADIOELEMENT APPLICATION	1	5	0	5	\$1,012.79	\$202.56	\$202.56	1.00
78223	NUCLEAR SCAN, BILIARY TRACT	1	1	0	1	\$95.00	\$95.00	\$95.00	1.00
78305	NUCLEAR SCAN OF BONES	1	1	0	1	\$20.03	\$20.03	\$20.03	1.00
78415	NUCLEAR SCAN OF HEART BLOOD	1	1	0	1	\$50.00	\$50.00	\$50.00	1.00
78435	NUCLEAR SCAN OF HEART FLOW	1	2	0	2	\$185.00	\$92.50	\$92.50	1.00
78479	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$128.70	\$128.70	\$128.70	1.00
78580	NUCLEAR SCAN OF LUNG	1	1	0	1	\$63.00	\$63.00	\$63.00	1.00
78593	NUCLEAR SCAN OF LUNG	1	1	0	1	\$82.00	\$82.00	\$82.00	1.00
78802	NUCLEAR EXAM OF LESIONS	1	1	0	1	\$108.40	\$108.40	\$108.40	1.00
78803	NUCLEAR SCAN OF TUMOR (3d)	1	1	0	1	\$80.00	\$80.00	\$80.00	1.00
78806	NUCLEAR EXAM OF ABSCESS	1	1	0	1	\$140.00	\$140.00	\$140.00	1.00
80002	1-2 CLINICAL CHEM TESTS	1	1	0	1	\$35.00	\$35.00	\$35.00	1.00
80006	6 CLINICAL CHEMISTRY TESTS	1	4	0	6	\$78.00	\$13.00	\$19.50	1.50
80008	8 CLINICAL CHEMISTRY TESTS	1	2	0	4	\$60.00	\$15.00	\$30.00	2.00
80059	HEPATITIS PANEL	1	1	0	1	\$20.00	\$20.00	\$20.00	1.00
82140	ASSAY OF BLOOD AMMONIA	1	1	0	1	\$29.10	\$29.10	\$29.10	1.00
82150	ASSAY OF SERUM ANYLASE	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
82250	ASSAY BLOOD BILIRUBIN	1	1	0	1	\$18.00	\$18.00	\$18.00	1.00
82570	ASSAY URINE CREATININE	1	2	0	2	\$25.20	\$12.60	\$12.60	1.00
82728	ASSAY FERRITIN	1	1	0	1	\$6.00	\$6.00	\$6.00	1.00
82756	FREE THYROXINE INDEX (T-7)	1	1	0	1	\$18.75	\$18.75	\$18.75	1.00
82792	BLOOD OXYGEN SATURATION	1	1	0	1	\$16.00	\$16.00	\$16.00	1.00
82947	ASSAY BODY FLUID, GLUCOSE	1	1	0	1	\$2.00	\$2.00	\$2.00	1.00
83002	PITUITARY GONADOTROPINS RIA	1	1	0	1	\$38.00	\$38.00	\$38.00	1.00
83498	RIA ASSAY OF PROGESTERONE	1	1	0	1	\$75.00	\$75.00	\$75.00	1.00
83718	BLOOD LIPOPROTEIN ASSAY	1	1	0	1	\$3.75	\$3.75	\$3.75	1.00
83750	ASSAY BLOOD MAGNESIUM	1	1	0	1	\$10.93	\$10.93	\$10.93	1.00
83992	ASSAY FOR PHENCYCLIDINE	1	1	0	1	\$5.20	\$5.20	\$5.20	1.00
84075	ASSAY ALKALINE PHOSPHATASE	1	1	0	1	\$22.00	\$22.00	\$22.00	1.00
84155	ASSAY SERUM PROTEIN	1	1	0	1	\$19.00	\$19.00	\$19.00	1.00
84244	RIA ASSAY OF RENIN	1	1	0	1	\$59.00	\$59.00	\$59.00	1.00
84450	UV-ASSAY TRANSAMINASE (SGOT)	1	1	0	2	\$30.00	\$15.00	\$30.00	2.00
84480	RIA ASSAY, TT-3	1	1	0	1	\$23.63	\$23.63	\$23.63	1.00
84550	ASSAY BLOOD URIC ACID	1	1	0	1	\$16.00	\$16.00	\$16.00	1.00
84555	ASSAY URIC ACID	1	2	0	2	\$20.00	\$10.00	\$10.00	1.00
84585	ASSAY URINE VMA	1	2	0	3	\$138.60	\$46.20	\$69.30	1.50
84695	ASSAY GENTAMICIN	1	1	0	2	\$6.40	\$3.20	\$6.40	2.00
85030	AUTOMATED HEMOGRAM	1	2	0	3	\$16.50	\$5.50	\$8.25	1.50
85041	RED BLOOD CELL (RBC) COUNT	1	1	0	1	\$9.60	\$9.60	\$9.60	1.00
85048	WHITE BLOOD CELL (WBC) COUNT	1	2	0	4	\$28.46	\$7.12	\$14.23	2.00
85376	FIBRINOGEN, THROMBIN	1	1	0	1	\$31.00	\$31.00	\$31.00	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----										(continued)		
PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO			
85520	HEPARIN ASSAY	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00			
85585	BLOOD PLATELET ESTIMATION	1	1	0	6	\$58.20	\$9.70	\$58.20	6.00			
86016	RBC ANTIBODY SCREEN	1	1	0	1	\$18.08	\$18.08	\$18.08	1.00			
86032	ANTIHUMAN GLOBULIN TEST	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00			
86083	BLOOD TYPING;ANTIBODY SCREEN	1	2	0	3	\$30.30	\$10.10	\$15.15	1.50			
86085	BLOOD TYPING;ANTIGEN SCREEN	1	2	0	3	\$39.00	\$13.00	\$19.50	1.50			
86128	COLLECT,STORAGE PT OWN BLOOD	1	2	0	4	\$235.88	\$58.97	\$117.94	2.00			
86287	HEPATITIS HAA, RIA, OR EIA	1	1	0	1	\$16.20	\$16.20	\$16.20	1.00			
86296	HEPATITIS A ANTIBODY TEST	1	1	0	1	\$29.20	\$29.20	\$29.20	1.00			
86298	HEPATITIS A ANTIBODY TEST	1	2	0	2	\$109.90	\$54.95	\$54.95	1.00			
86319	IMMUNOASSAY FOR DRUGS	1	1	0	1	\$50.00	\$50.00	\$50.00	1.00			
86349	LEUKOCYTE TRANSFUSION	1	2	0	3	\$445.00	\$148.33	\$222.50	1.50			
86403	RAPID TEST, INFECTIOUS AGENT	1	3	0	14	\$153.60	\$10.97	\$51.20	4.67			
86404	POOLING OF BLOOD PRODUCTS	1	1	0	1	\$15.72	\$15.72	\$15.72	1.00			
86423	RADIOIMMUNOSORBENT TEST IGE	1	1	0	1	\$43.00	\$43.00	\$43.00	1.00			
86595	TISSUE CULTURE	1	2	0	4	\$117.38	\$29.35	\$58.69	2.00			
86805	LYMPHOCYTOTOXICITY ASSAY	1	1	0	2	\$111.00	\$55.50	\$111.00	2.00			
86900	86900	1	1	0	1	\$13.17	\$13.17	\$13.17	1.00			
87070	CULTURE SPECIMEN, BACTERIA	1	2	0	2	\$40.30	\$20.15	\$20.15	1.00			
87081	BACTERIA CULTURE SCREEN	1	1	0	1	\$19.00	\$19.00	\$19.00	1.00			
87101	SKIN FUNGUS CULTURE	1	1	0	1	\$20.00	\$20.00	\$20.00	1.00			
87102	FUNGUS ISOLATION CULTURE	1	1	0	2	\$46.60	\$23.30	\$46.60	2.00			
87175	ASSAY, ENDOTOXIN, BACTERIAL	1	2	0	4	\$226.95	\$56.74	\$113.48	2.00			
87205	SMEAR, STAIN & INTERPRET	1	1	0	1	\$13.00	\$13.00	\$13.00	1.00			
87210	SMEAR, STAIN & INTERPRET	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00			
88170	FINE NEEDLE ASPIRATION	1	1	0	1	\$34.50	\$34.50	\$34.50	1.00			
88173	INTERPRETATION OF SMEAR	1	1	0	1	\$47.00	\$47.00	\$47.00	1.00			
88182	CELL MARKER STUDY	1	1	0	1	\$32.20	\$32.20	\$32.20	1.00			
88280	CHROMOSOME KARYOTYPE STUDY	1	1	0	1	\$41.00	\$41.00	\$41.00	1.00			
88318	CHEMICAL HISTOCHEMISTRY	1	2	0	4	\$40.00	\$10.00	\$20.00	2.00			
88319	ENZYME HISTOCHEMISTRY	1	2	0	2	\$68.00	\$34.00	\$34.00	1.00			
88325	COMPREHENSIVE REVIEW OF DATA	1	1	0	1	\$93.75	\$93.75	\$93.75	1.00			
88332	PATHOLOGY CONSULT IN SURGERY	1	1	0	1	\$43.30	\$43.30	\$43.30	1.00			
88347	IMMUNOFLOURESCENT STUDY	1	1	0	1	\$14.24	\$14.24	\$14.24	1.00			
88348	ELECTRON MICROSCOPY	1	1	0	1	\$175.00	\$175.00	\$175.00	1.00			
88399	SURGICAL PATHOLOGY PROCEDURE	1	1	0	2	\$120.00	\$60.00	\$120.00	2.00			
90000	OFFICE/OP VISIT, NEW, BRIEF	1	1	1	1	\$25.00	\$25.00	\$25.00	1.00			
90017	OFFICE/OP VISIT, NEW, EXTEND	1	2	2	2	\$96.66	\$48.33	\$48.33	1.00			
90115	HOME VISIT, NEW, INTERMED	1	4	4	4	\$274.00	\$68.50	\$68.50	1.00			
90130	HOME VISIT, MINIMAL	1	1	1	1	\$46.24	\$46.24	\$46.24	1.00			
90140	HOME VISIT, BRIEF	1	1	2	2	\$190.00	\$95.00	\$190.00	2.00			
90170	HOME VISIT, EXTENDED	1	1	1	1	\$107.10	\$107.10	\$107.10	1.00			
90505	EMERGENCY CARE, NEW, BRIEF	1	1	1	1	\$41.00	\$41.00	\$41.00	1.00			
90520	EMERGENCY CARE, NEW, COMPHEN	1	1	1	1	\$62.70	\$62.70	\$62.70	1.00			

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSP PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
90530	EMERGENCY CARE, MINIMAL	1	1	3	3	\$26.40	\$8.80	\$26.40	3.00
90550	EMERGENCY CARE, LIMITED	1	1	0	0	\$8.25		\$8.25	0.00
90650	2ND OR 3RD OPINION	1	2	1	4	\$92.00	\$23.00	\$46.00	2.00
90699	GENERAL MEDICAL SERVICE	1	1	0	2	\$105.00	\$52.50	\$105.00	2.00
90742	SPECIAL PASSIVE IMMUNIZATION	1	3	1	7	\$823.80	\$117.69	\$274.60	2.33
90830	PSYCHOLOGICAL TESTING	1	1	4	4	\$208.00	\$52.00	\$208.00	4.00
90847	SPECIAL FAMILY THERAPY	1	1	2	2	\$86.50	\$43.25	\$86.50	2.00
90853	SPECIAL GROUP THERAPY	1	1	1	1	\$37.10	\$37.10	\$37.10	1.00
91010	ESOPHAGUS MOTILITY STUDY	1	1	0	0	\$0.00	\$0.00	\$0.00	1.00
92014	EYE EXAM, ESTABLISHED PATIENT	1	1	1	1	\$13.00	\$13.00	\$13.00	1.00
92020	SPECIAL EYE EVALUATION	1	1	1	1	\$1,626.75	\$1,626.75	\$1,626.75	1.00
92081	VISUAL FIELD EXAMINATION(S)	1	1	1	1	\$60.00	\$60.00	\$60.00	1.00
92083	VISUAL FIELD EXAMINATION(S)	1	1	1	1	\$0.00	\$0.00	\$0.00	1.00
92100	SERIAL TONOMETRY EXAM(S)	1	1	1	1	\$0.00	\$0.00	\$0.00	1.00
92511	NASOPHARYNGOSCOPY	1	1	1	1	\$125.00	\$125.00	\$125.00	1.00
92551	PURE TONE HEARING TEST, AIR	1	1	1	1	\$16.00	\$16.00	\$16.00	1.00
92552	PURE TONE AUDIOMETRY, AIR	1	2	2	2	\$36.36	\$18.18	\$18.18	1.00
92555	SPEECH THRESHOLD AUDIOMETRY	1	3	4	4	\$66.21	\$16.55	\$22.07	1.33
92557	COMPREHENSIVE HEARING TEST	1	1	0	0	\$61.80	\$61.80	\$61.80	1.00
92569	ACOUSTIC REFLEX DECAY TEST	1	1	1	1	\$21.00	\$21.00	\$21.00	1.00
92585	BRAINSTEM EVOKED AUDIOMETRY	1	1	0	0	\$94.50	\$94.50	\$94.50	1.00
92950	HEART/LUNG/RESUSCITATION/CPR	1	1	0	1	\$215.00	\$215.00	\$215.00	1.00
92977	DISSOLVE CLOT, HEART VESSEL	1	2	0	2	\$273.06	\$136.53	\$136.53	1.00
93005	ELECTROCARDIOGRAM, TRACING	1	1	1	1	\$8.00	\$8.00	\$8.00	1.00
93965	EXTREMITY STUDY	1	1	1	1	\$39.20	\$39.20	\$39.20	1.00
94060	EVALUATION OF WHEEZING	1	1	0	1	\$60.00	\$60.00	\$60.00	1.00
94150	VITAL CAPACITY TEST	1	1	1	1	\$6.05	\$6.05	\$6.05	1.00
94240	RESIDUAL LUNG CAPACITY	1	1	1	1	\$21.00	\$21.00	\$21.00	1.00
94360	MEASURE AIRFLOW RESISTANCE	1	1	1	1	\$11.99	\$11.99	\$11.99	1.00
94400	CO2 BREATHING RESPONSE CURVE	1	1	1	1	\$10.19	\$10.19	\$10.19	1.00
94640	AIRWAY INHALATION TREATMENT	1	1	1	1	\$25.00	\$25.00	\$25.00	1.00
94656	INITIAL VENTILATOR MANAGEMENT	1	1	0	1	\$51.08	\$51.08	\$51.08	1.00
94664	AEROSOL OR VAPOR INHALATIONS	1	1	2	2	\$72.20	\$36.10	\$72.20	2.00
94665	AEROSOL OR VAPOR INHALATIONS	1	1	3	3	\$52.50	\$17.50	\$52.50	3.00
94760	MEASURE BLOOD OXYGEN LEVEL	1	1	2	2	\$30.00	\$15.00	\$30.00	2.00
95005	SENSITIVITY SKIN TESTS, 1-5	1	1	1	1	\$5.60	\$5.60	\$5.60	1.00
95014	SENSITIVITY SKIN TESTS, 1-5	1	1	1	1	\$4.56	\$4.56	\$4.56	1.00
95120	IMMUNOTHERAPY, ONE ANTIGEN	1	1	1	2	\$12.32	\$6.16	\$12.32	2.00
96414	CHEMOTHERAPY, INFUSION METHOD	1	1	0	1	\$30.15	\$30.15	\$30.15	1.00
96425	CHEMOTHERAPY, INFUSION METHOD	1	3	3	3	\$393.60	\$131.20	\$131.20	1.00
96440	CHEMOTHERAPY, INTRACAVITARY	1	1	0	0	\$23.61		\$23.61	0.00
97110	THERAPEUTIC EXERCISES 30 MIN	1	1	2	2	\$40.00	\$20.00	\$40.00	2.00
97540	TRAINING FOR DAILY LIVING	1	1	0	3	\$246.00	\$82.00	\$246.00	3.00
97799	PHYSICAL MEDICINE PROCEDURE	1	1	3	3	\$150.00	\$50.00	\$150.00	3.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDBP)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BONE MARROW NON-TRANSF PROF SERV -----
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
98800	CONFERENCE WITH PHYSICIAN	1	1	0	3	\$107.93	\$35.98	\$107.93	3.00
98912	PROLONGED MD ATTENDANCE	1	2	2	2	\$68.22	\$34.11	\$34.11	1.00
99151	OFFICE/OUTPATIENT VISIT, EST	1	17	0	19	\$7,550.00	\$397.37	\$444.12	1.12
99211	OFFICE/OUTPATIENT VISIT, EST	1	14	13	14	\$255.34	\$18.24	\$18.24	1.00
99215	INITIAL HOSPITAL CARE	1	1	1	1	\$75.25	\$75.25	\$75.25	1.00
99221	OFFICE CONSULTATION	1	1	0	1	\$100.00	\$100.00	\$100.00	1.00
99241	OFFICE CONSULTATION	1	1	1	1	\$184.00	\$184.00	\$184.00	1.00
99242	OFFICE CONSULTATION	1	1	0	1	\$81.90	\$81.90	\$81.90	1.00
99245	OFFICE CONSULTATION	1	1	1	1	\$173.80	\$173.80	\$173.80	1.00
99252	INITIAL INPATIENT CONSULT	1	1	0	1	\$85.00	\$85.00	\$85.00	1.00
99262	FOLLOW-UP INPATIENT CONSULT	1	1	0	-3	\$-150.00	\$50.00	\$-150.00	-3.00
99263	FOLLOW-UP INPATIENT CONSULT	1	1	0	1	\$86.40	\$86.40	\$86.40	1.00
99285	EMERGENCY DEPT VISIT	1	1	1	1	\$126.23	\$126.23	\$126.23	1.00
99291	CRITICAL CARE, FIRST HOUR	1	2	0	18	\$2,062.32	\$114.57	\$1,031.16	9.00
99292	CRITICAL CARE, ADDL 30 MIN	1	1	0	5	\$272.40	\$54.48	\$272.40	5.00
99353	HOME VISIT, ESTAB PATIENT	1	3	3	3	\$448.47	\$149.49	\$149.49	1.00
TYPE		4,682	2,284	14,100	\$986,298.51				

----- BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV -----

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
99070	SPECIAL SUPPLIES	62	576	0	5,097	\$362,622.37	\$71.14	\$629.55	8.85
84999	CLINICAL CHEMISTRY TEST	55	424	0	2,733	\$157,301.65	\$57.56	\$370.99	6.45
90060	OFFICE/OP VISIT, EST, INTERM	43	173	201	201	\$5,286.88	\$26.30	\$30.56	1.16
76499	RADIOGRAPHIC PROCEDURE	40	124	0	233	\$53,931.24	\$231.46	\$434.93	1.88
90015	OFFICE/OP VISIT, NEW, INTERM	39	122	82	182	\$23,381.32	\$128.47	\$191.65	1.49
90050	OFFICE/OP VISIT, EST, LTD	38	129	144	144	\$3,430.44	\$23.82	\$26.59	1.12
71020	CHEST X-RAY	35	85	0	94	\$2,238.08	\$23.81	\$26.33	1.11
90040	OFFICE/OP VISIT, EST, BRIEF	27	58	63	63	\$1,403.94	\$22.28	\$24.21	1.09
90782	INJECTION (SC)/(IM)	24	113	487	488	\$5,449.92	\$11.17	\$48.23	4.32
85095	BONE MARROW ASPIRATION	20	32	0	34	\$2,086.91	\$61.38	\$65.22	1.06
90515	EMERGENCY CARE, NEW, INTERMED	20	21	13	26	\$4,397.78	\$169.15	\$209.42	1.24
90070	OFFICE/OP VISIT, EST, EXTEND	19	56	156	156	\$2,597.27	\$16.65	\$46.38	2.79
85023	AUTOMATED HEMOGRAM	18	83	0	102	\$1,914.66	\$18.77	\$23.07	1.23
96410	CHEMOTHERAPY, INFUSION METHOD	17	86	89	112	\$4,177.16	\$37.30	\$48.57	1.30
36430	BLOOD TRANSFUSION SERVICE	16	67	0	92	\$3,015.11	\$32.77	\$45.00	1.37
85097	BONE MARROW INTERPRETATION	16	28	0	31	\$1,588.19	\$51.23	\$56.72	1.11
85100	BONE MARROW EXAMINATION	15	22	0	25	\$2,222.99	\$88.92	\$101.05	1.14
88313	SPECIAL STAINS	14	18	0	30	\$492.45	\$16.41	\$27.36	1.67

DEPARTMENT OF DEFENSE CHAMPUS
 ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV
 (continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
90220	HOSPITAL CARE, NEW, COMPREH	14	18	0	19	\$1,744.04	\$91.79	\$96.89	1.06
99214	OFFICE/OUTPATIENT VISIT, EST	14	58	51	61	\$2,807.34	\$46.02	\$48.40	1.05
71260	CONTRAST CAT SCAN OF CHEST	13	23	0	24	\$4,313.08	\$179.71	\$187.53	1.04
74160	CONTRAST CAT SCAN OF ABDOMEN	13	24	0	27	\$7,140.25	\$264.45	\$297.51	1.13
85007	DIFFERENTIAL WBC COUNT	13	57	0	60	\$433.96	\$7.23	\$7.61	1.05
85102	BONE MARROW BIOPSY	13	24	0	28	\$2,112.13	\$75.43	\$88.01	1.17
88305	TISSUE EXAM BY PATHOLOGIST	13	15	0	16	\$1,052.94	\$65.81	\$70.20	1.07
90020	OFFICE/OP VISIT, NEW, COMPRH	13	15	16	15	\$1,052.35	\$70.16	\$70.16	1.00
62270	SPINAL FLUID TAP, DIAGNOSTIC	12	21	0	21	\$1,480.94	\$70.52	\$70.52	1.00
80019	19 OR MORE BLOOD/URINE TESTS	12	22	0	68	\$667.28	\$9.81	\$30.33	3.09
81000	URINALYSIS WITH MICROSCOPY	12	22	0	23	\$161.32	\$7.01	\$7.33	1.05
85025	AUTOMATED HEMOGRAM	12	49	0	68	\$1,099.61	\$16.17	\$22.44	1.39
90030	OFFICE/OP VISIT, EST, MINIM	12	48	109	109	\$939.67	\$8.62	\$19.58	2.27
90780	IV INFUSION THERAPY, 1 HOUR	12	39	119	120	\$21,373.34	\$178.11	\$548.03	3.08
94720	MONOXIDE DIFFUSING CAPACITY	12	19	18	19	\$716.98	\$37.74	\$37.74	1.00
96545	PROVIDE CHEMOTHERAPY AGENT	12	45	353	353	\$23,686.75	\$67.10	\$526.37	7.84
80018	17-18 BLOOD/URINE TESTS	11	31	0	49	\$729.36	\$14.88	\$23.53	1.58
85105	BONE MARROW, INTERPRETATION	11	17	0	19	\$842.51	\$44.34	\$49.56	1.12
94010	BREATHING CAPACITY TEST	11	14	13	14	\$325.73	\$23.27	\$23.27	1.00
96530	PUMP REFILLING, MAINTENANCE	11	70	96	96	\$3,032.25	\$31.59	\$43.32	1.37
99213	OFFICE/OUTPATIENT VISIT, EST	11	37	25	38	\$1,141.38	\$30.04	\$30.85	1.03
71010	CHEST X-RAY	10	14	0	15	\$239.19	\$15.95	\$17.08	1.07
72192	CAT SCAN OF PELVIS	10	16	0	18	\$3,170.90	\$176.16	\$198.18	1.13
72193	CONTRAST CAT SCAN OF PELVIS	10	17	0	17	\$2,022.94	\$119.00	\$119.00	1.00
78306	NUCLEAR SCAN OF SKELETON	10	18	0	19	\$3,362.36	\$176.97	\$186.80	1.06
90620	COMPREHENSIVE CONSULTATION	10	13	11	13	\$704.49	\$54.19	\$54.19	1.00
90844	PSYCHOTHERAPY, 45-50 MIN	10	23	28	31	\$1,755.65	\$56.63	\$76.33	1.35
36415	DRAWING BLOOD	9	42	0	49	\$299.70	\$6.12	\$7.14	1.17
71250	CAT SCAN OF CHEST	9	16	0	19	\$2,888.97	\$152.05	\$180.56	1.19
78999	NUCLEAR DIAGNOSTIC EXAM	9	13	0	28	\$4,680.29	\$167.15	\$360.02	2.15
83735	ASSAY BLOOD MAGNESIUM	9	40	0	51	\$868.75	\$17.03	\$21.72	1.28
85022	AUTOMATED HEMOGRAM	9	38	0	49	\$745.04	\$15.20	\$19.61	1.29
90080	OFFICE/OP VISIT, EST, COMPRH	9	51	60	54	\$3,434.86	\$63.61	\$67.35	1.06
96412	CHEMOTHERAPY, INFUSION METHOD	9	30	151	106	\$5,092.75	\$48.04	\$169.76	3.53
74150	CAT SCAN OF ABDOMEN	8	16	0	18	\$3,613.30	\$200.74	\$225.83	1.13
85027	AUTOMATED HEMOGRAM	8	38	0	42	\$802.22	\$19.10	\$21.11	1.11
88311	DECALCIFY TISSUE	8	9	0	10	\$141.92	\$14.19	\$15.77	1.11
90215	HOSPITAL CARE, NEW, INTERMED	8	13	0	13	\$845.52	\$65.04	\$65.04	1.00
90260	HOSPITAL VISIT, INTERMEDIATE	8	15	0	44	\$914.98	\$20.79	\$61.00	2.93
93010	ELECTROCARDIOGRAM REPORT	8	11	7	11	\$159.11	\$14.46	\$14.46	1.00
99199	SPECIAL SERVICE OR REPORT	8	18	0	74	\$1,998.16	\$27.00	\$111.01	4.11
80012	12 CLINICAL CHEMISTRY TESTS	7	23	0	35	\$269.45	\$7.70	\$11.72	1.52
85044	RETICULOCYTE COUNT	7	8	0	10	\$105.47	\$10.55	\$13.18	1.25
85595	ELECTRONIC PLATELET COUNT	7	34	0	37	\$338.94	\$9.16	\$9.97	1.09

DEPARTMENT OF DEFENSE CHAMPUS
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BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
88312	SPECIAL STAINS	7	11	0	26	\$284.31	\$10.93	\$25.85	2.36
90292	HOSPITAL DISCHARGE DAY	7	14	2	14	\$732.89	\$52.35	\$52.35	1.00
90630	COMPLEX CONSULTATION	7	7	7	7	\$778.73	\$111.25	\$111.25	1.00
90781	IV INFUSION, ADDITIONAL HOUR	7	18	46	47	\$1,530.32	\$32.56	\$85.02	2.61
90784	INJECTION (IV)	7	11	18	18	\$226.56	\$12.59	\$20.60	1.64
94240	RESIDUAL LUNG CAPACITY	7	9	9	9	\$163.59	\$18.18	\$18.18	1.00
94799	PULMONARY SERVICE/PROCEDURE	7	11	30	30	\$1,826.04	\$60.87	\$166.00	2.73
96549	CHEMOTHERAPY, UNSPECIFIED	7	29	182	182	\$8,292.68	\$45.56	\$285.95	6.28
99173	CRITICAL CARE, FOLLOW-UP	7	9	1	26	\$2,454.36	\$94.40	\$272.71	2.89
99212	OFFICE/OUTPATIENT VISIT, EST	7	9	6	9	\$204.12	\$22.68	\$22.68	1.00
36491	INSERTION OF CATHETER, VEIN	6	6	0	8	\$2,281.37	\$285.17	\$380.23	1.33
36497	REMOVE INFUSION PUMP	6	6	0	11	\$1,563.45	\$142.13	\$260.58	1.83
70220	X-RAY EXAM OF SINUSES	6	7	0	7	\$131.69	\$18.81	\$18.81	1.00
84443	ASSAY THYROID STIM HORMONE	6	6	0	6	\$149.47	\$24.91	\$24.91	1.00
88180	CELL MARKER STUDY	6	17	0	73	\$2,422.72	\$33.19	\$142.51	4.29
88321	MICROSLIDE CONSULTATION	6	7	0	7	\$453.86	\$64.84	\$64.84	1.00
96450	CHEMOTHERAPY, INTO CNS	6	17	18	21	\$2,110.21	\$100.49	\$124.13	1.24
99000	SPECIMEN HANDLING	6	9	0	14	\$60.89	\$4.35	\$6.77	1.56
20220	BONE BIOPSY, TROCAR/NEEDLE	5	5	0	5	\$573.71	\$114.74	\$114.74	1.00
38230	BONE MARROW COLLECTION	5	5	0	8	\$5,881.28	\$735.16	\$1,176.26	1.60
77290	SET RADIATION THERAPY FIELD	5	5	0	5	\$475.63	\$95.13	\$95.13	1.00
80016	13-16 BLOOD/URINE TESTS	5	25	0	25	\$545.04	\$21.80	\$21.80	1.00
82565	ASSAY BLOOD CREATININE	5	9	0	11	\$37.29	\$3.39	\$4.14	1.22
82947	ASSAY BODY FLUID, GLUCOSE	5	5	0	6	\$39.63	\$6.61	\$7.93	1.20
85024	AUTOMATED HEMOGRAM	5	52	0	55	\$478.21	\$8.69	\$9.20	1.06
85029	AUTOMATED HEMOGRAM	5	41	0	48	\$147.52	\$3.07	\$3.60	1.17
85060	BLOOD SMEAR INTERPRETATION	5	11	0	12	\$174.57	\$14.55	\$15.87	1.09
85103	BONE MARROW BIOPSY & EXAM	5	8	0	8	\$249.12	\$31.14	\$31.14	1.00
85610	PROTHROMBIN TIME	5	6	0	6	\$43.70	\$7.28	\$7.28	1.00
86068	BLOOD COMPATIBILITY TEST	5	6	0	8	\$100.48	\$12.56	\$16.75	1.33
86082	BLOOD TYPING, ABO & RHO(D)	5	12	0	13	\$143.92	\$11.07	\$11.99	1.08
86317	IMMUNOASSAY, INFECTIOUS AGENT	5	11	0	18	\$371.33	\$20.63	\$33.76	1.64
88104	MICROSCOPIC EXAM OF CELLS	5	9	0	10	\$323.10	\$32.31	\$35.90	1.11
88304	TISSUE EXAM BY PATHOLOGIST	5	8	0	8	\$430.31	\$53.79	\$53.79	1.00
90250	HOSPITAL VISIT, LIMITED	5	10	0	50	\$738.78	\$14.78	\$73.88	5.00
90270	HOSPITAL VISIT, EXTENDED	5	21	11	22	\$1,057.94	\$48.09	\$50.38	1.05
90605	INTERMEDIATE CONSULTATION	5	17	16	17	\$537.88	\$31.64	\$31.64	1.00
90610	EXTENDED CONSULTATION	5	15	13	15	\$636.30	\$42.42	\$42.42	1.00
94700	BLOOD GAS ANALYSIS	5	5	5	5	\$95.85	\$19.17	\$19.17	1.00
99160	CRITICAL CARE, EACH HOUR	5	9	0	16	\$3,371.83	\$210.74	\$374.65	1.78
74170	CONTRAST CAT SCANS, ABDOMEN	4	9	0	10	\$2,145.26	\$214.53	\$238.36	1.11
74181	MAGNETIC IMAGE, ABDOMEN(MRI)	4	5	0	5	\$2,837.63	\$567.53	\$567.53	1.00
76140	X-RAY CONSULTATION	4	4	0	6	\$489.95	\$81.66	\$122.49	1.50
77263	RADIATION THERAPY PLANNING	4	4	0	4	\$424.75	\$106.19	\$106.19	1.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDB)
HCSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
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TOTAL PATIENT TREATMENT EPISODES
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BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
77300	RADIATION THERAPY DOSE PLAN	4	4	0	4	\$45.80	\$11.45	\$11.45	1.00
77315	RADIATION THERAPY DOSE PLAN	4	5	0	5	\$471.29	\$94.26	\$94.26	1.00
77336	RADIATION PHYSICS CONSULT	4	6	0	6	\$80.63	\$13.44	\$13.44	1.00
77430	WEEKLY RADIATION THERAPY	4	7	0	11	\$815.50	\$74.14	\$116.50	1.57
77499	RADIATION THERAPY MANAGEMENT	4	17	0	40	\$6,715.30	\$167.88	\$395.02	2.35
78802	NUCLEAR EXAM OF LESIONS	4	6	0	6	\$835.31	\$139.22	\$139.22	1.00
80007	7 CLINICAL CHEMISTRY TESTS	4	8	0	8	\$207.24	\$25.91	\$25.91	1.00
85021	AUTOMATED HEMOGRAM	4	26	0	28	\$294.06	\$10.50	\$11.31	1.08
85031	MANUAL HEMOGRAM, COMPLETE CBC	4	5	0	5	\$65.00	\$13.00	\$13.00	1.00
85730	THROMBOPLASTIN TIME, PARTIAL	4	5	0	5	\$48.78	\$9.76	\$9.76	1.00
87040	BLOOD CULTURE FOR BACTERIA	4	8	0	9	\$279.85	\$31.09	\$34.98	1.13
88173	INTERPRETATION OF SMEAR	4	5	0	5	\$236.65	\$47.33	\$47.33	1.00
88262	CHROMOSOME COUNT: 15-20 CELLS	4	6	0	6	\$623.35	\$103.89	\$103.89	1.00
88346	IMMUNOFLUORESCENT STUDY	4	5	0	11	\$289.88	\$26.35	\$57.98	2.20
90010	OFFICE/OP VISIT, NEW, LTD	4	4	4	4	\$159.92	\$39.98	\$39.98	1.00
90600	LIMITED CONSULTATION	4	6	6	6	\$177.13	\$29.52	\$29.52	1.00
90641	LIMITED FOLLOW-UP CONSULT	4	4	4	4	\$142.85	\$35.71	\$35.71	1.00
96408	CHEMOTHERAPY, PUSH TECHNIQUE	4	12	12	12	\$511.10	\$42.59	\$42.59	1.00
99211	OFFICE/OUTPATIENT VISIT, EST	4	16	14	17	\$250.33	\$14.73	\$15.65	1.06
99215	OFFICE/OUTPATIENT VISIT, EST	4	7	4	7	\$366.32	\$52.33	\$52.33	1.00
11100	BLOPSY OF SKIN LESION	3	4	0	4	\$136.80	\$34.20	\$34.20	1.00
38999	BLOOD/LYMPH SYSTEM PROCEDURE	3	3	0	5	\$2,893.18	\$578.64	\$964.39	1.67
70470	CONTRAST CAT SCANS OF HEAD	3	3	0	3	\$496.20	\$165.40	\$165.40	1.00
76700	ECHO EXAM OF ABDOMEN	3	3	0	3	\$127.91	\$42.64	\$42.64	1.00
77334	RADIATION TREATMENT AID(S)	3	3	0	3	\$122.67	\$40.89	\$40.89	1.00
77425	WEEKLY RADIATION THERAPY	3	5	0	15	\$637.19	\$42.48	\$127.44	3.00
78471	NUCLEAR SCAN, HEART MUSCLE	3	3	0	3	\$183.43	\$61.14	\$61.14	1.00
78472	NUCLEAR SCAN, HEART MUSCLE	3	3	0	3	\$272.43	\$90.81	\$90.81	1.00
78476	NUCLEAR SCAN, HEART MUSCLE	3	3	0	3	\$172.95	\$57.65	\$57.65	1.00
78990	PROVIDE RADIOISOTOPE(S)	3	3	0	3	\$401.06	\$133.69	\$133.69	1.00
80004	4 CLINICAL CHEMISTRY TESTS	3	13	0	17	\$131.92	\$7.76	\$10.15	1.31
80059	HEPATITIS PANEL	3	3	0	3	\$177.60	\$59.20	\$59.20	1.00
82784	ASSAY GAMMAGLOBULIN A/D/G/M	3	3	0	5	\$95.91	\$19.18	\$31.97	1.67
82977	ASSAY OF GGT ENZYME	3	4	0	5	\$27.88	\$5.58	\$6.97	1.25
83750	ASSAY BLOOD MAGNESIUM	3	10	0	14	\$121.89	\$8.71	\$12.19	1.40
84132	ASSAY BLOOD POTASSIUM	3	3	0	3	\$29.60	\$9.87	\$9.87	1.00
85109	BONE MARROW PREPARATION	3	4	0	4	\$119.64	\$29.91	\$29.91	1.00
85580	BLOOD PLATELET COUNT	3	21	0	24	\$331.29	\$13.80	\$15.78	1.14
85651	RBC SEDIMENTATION RATE	3	4	0	4	\$41.18	\$10.30	\$10.30	1.00
86016	RBC ANTIBODY SCREEN	3	4	0	4	\$47.62	\$11.91	\$11.91	1.00
86256	FLUORESCENT ANTIBODY; TITER	3	3	0	5	\$151.00	\$30.20	\$50.33	1.67
86813	HLA TYPING, A, B, AND/OR C	3	3	0	3	\$709.20	\$236.40	\$236.40	1.00
86817	HLA TYPING, DR	3	3	0	3	\$976.00	\$325.33	\$325.33	1.00
86999	IMMUNOLOGY PROCEDURE	3	3	0	3	\$110.08	\$36.69	\$36.69	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
89051	BODY FLUID CELL COUNT	3	3	0	3	\$43.62	\$14.54	\$14.54	1.00
89399	PATHOLOGY LAB PROCEDURE	3	4	0	6	\$766.50	\$127.75	\$191.63	1.50
90240	HOSPITAL VISIT, BRIEF	3	16	0	37	\$1,255.00	\$33.92	\$78.44	2.31
90788	INJECTION OF ANTIBIOTIC	3	8	11	11	\$524.38	\$47.67	\$65.55	1.38
93000	ELECTROCARDIOGRAM, COMPLETE	3	3	3	3	\$66.13	\$22.04	\$22.04	1.00
93307	ECHO EXAM OF HEART	3	3	2	3	\$367.76	\$122.59	\$122.59	1.00
94060	EVALUATION OF WHEEZING	3	4	3	4	\$200.44	\$50.11	\$50.11	1.00
99082	UNUSUAL PHYSICIAN TRAVEL	3	3	0	67	\$1,120.40	\$16.72	\$373.47	22.33
20240	BONE BIOPSY, EXCISIONAL	2	2	0	2	\$227.51	\$113.76	\$113.76	1.00
36000	PLACE NEEDLE IN VEIN	2	2	0	3	\$50.00	\$50.00	\$50.00	1.00
36010	PLACE CATHETER IN VEIN	2	2	0	3	\$283.85	\$141.93	\$141.93	1.00
36495	IMPLANT INFUSION PUMP	2	2	0	3	\$1,314.50	\$438.17	\$657.25	1.50
70450	CAT SCAN OF HEAD OR BRAIN	2	2	0	2	\$568.46	\$284.23	\$284.23	1.00
70486	CAT SCAN OF FACE, JAW	2	2	0	2	\$211.04	\$105.52	\$105.52	1.00
71015	CHEST X-RAY	2	3	0	3	\$146.00	\$48.67	\$48.67	1.00
71100	X-RAY EXAM OF RIBS	2	2	0	2	\$47.00	\$23.50	\$23.50	1.00
71550	MAGNETIC IMAGE, CHEST	2	2	0	2	\$127.17	\$63.59	\$63.59	1.00
72040	X-RAY EXAM OF NECK SPINE	2	2	0	2	\$121.00	\$60.50	\$60.50	1.00
72050	X-RAY EXAM OF NECK SPINE	2	2	0	2	\$48.50	\$24.25	\$24.25	1.00
72131	CAT SCAN OF LOWER SPINE	2	2	0	3	\$841.00	\$280.33	\$420.50	1.50
72196	MAGNETIC IMAGE, PELVIS	2	2	0	2	\$109.97	\$54.99	\$54.99	1.00
73030	X-RAY EXAM OF SHOULDER	2	2	0	2	\$11.25	\$5.63	\$5.63	1.00
73130	X-RAY EXAM OF HAND	2	2	0	2	\$88.30	\$44.15	\$44.15	1.00
73140	X-RAY EXAM OF FINGER(S)	2	3	0	3	\$88.00	\$29.33	\$29.33	1.00
73550	X-RAY EXAM OF THIGH	2	2	0	3	\$78.32	\$26.11	\$39.16	1.50
73590	X-RAY EXAM OF LOWER LEG	2	3	0	3	\$82.04	\$27.35	\$27.35	1.00
74000	X-RAY EXAM OF ABDOMEN	2	2	0	3	\$140.24	\$46.75	\$70.12	1.50
74020	X-RAY EXAM OF ABDOMEN	2	2	0	2	\$49.09	\$24.55	\$24.55	1.00
74022	X-RAY EXAM SERIES, ABDOMEN	2	2	0	2	\$47.08	\$23.54	\$23.54	1.00
76360	CAT SCAN FOR NEEDLE BIOPSY	2	2	0	2	\$254.84	\$127.42	\$127.42	1.00
76856	ECHO EXAM OF PELVIS	2	2	0	2	\$100.00	\$50.00	\$50.00	1.00
77262	RADIATION THERAPY PLANNING	2	2	0	2	\$469.28	\$234.64	\$234.64	1.00
77285	SET RADIATION THERAPY FIELD	2	2	0	2	\$236.64	\$118.32	\$118.32	1.00
77410	DAILY RADIATION THERAPY	2	2	0	2	\$187.12	\$93.56	\$93.56	1.00
78481	NUCLEAR SCAN, HEART MUSCLE	2	2	0	2	\$226.95	\$113.48	\$113.48	1.00
80500	LAB PATHOLOGY CONSULTATION	2	2	0	2	\$152.91	\$16.99	\$25.49	1.50
81002	URINALYSIS WITHOUT SCOPE	2	6	0	2	\$15.00	\$7.50	\$7.50	1.00
83545	AUTO-ASSAY SERUM IRON	2	2	0	2	\$26.17	\$13.09	\$13.09	1.00
83718	BLOOD LIPOPROTEIN ASSAY	2	2	0	2	\$29.45	\$14.73	\$14.73	1.00
84436	RIA ASSAY, TRUE THYROXINE	2	2	0	2	\$25.91	\$12.96	\$12.96	1.00
84460	UV-ASSAY TRANSAMINASE (SGPT)	2	3	0	4	\$8.80	\$2.20	\$2.93	1.33
84479	ASSAY TRIIODOTHYRONINE (T-3)	2	2	0	2	\$25.16	\$12.58	\$12.58	1.00
84480	RIA ASSAY, TT-3	2	2	0	2	\$69.50	\$34.75	\$34.75	1.00
84520	ASSAY BUN	2	3	0	6	\$17.31	\$2.89	\$5.77	2.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
85014	HEMATOCRIT	2	2	0	2	\$17.20	\$8.60	\$8.60	1.00
85048	WHITE BLOOD CELL (WBC) COUNT	2	7	0	7	\$74.93	\$10.70	\$10.70	1.00
85590	PLATELET PHASE MICROSCOPY	2	14	0	15	\$169.94	\$11.33	\$12.14	1.07
85650	RBC SEDIMENTATION RATE	2	2	0	2	\$20.62	\$10.31	\$10.31	1.00
85999	HEMATOLOGY PROCEDURE	2	2	0	3	\$17.64	\$5.88	\$8.82	1.50
86171	COMPLEMENT FIXATION, EACH	2	2	0	3	\$129.50	\$43.17	\$64.75	1.50
86287	HEPATITIS HAA, RIA, OR EIA	2	3	0	4	\$118.50	\$29.63	\$39.50	1.33
86289	HEPATITIS BC ANTIBODY TEST	2	3	0	3	\$81.53	\$27.18	\$27.18	1.00
86312	HIV ANTIBODY DETECTION	2	3	0	3	\$110.02	\$36.67	\$36.67	1.00
86329	IMMUNODIFFUSION, EACH	2	2	0	2	\$61.85	\$30.92	\$30.92	1.00
86687	HTLV I ANTIBODY DETECTION	2	3	0	3	\$55.40	\$18.47	\$18.47	1.00
87070	CULTURE SPECIMEN, BACTERIA	2	3	0	3	\$64.56	\$21.52	\$21.52	1.00
87086	URINE CULTURE, COLONY COUNT	2	3	0	3	\$34.21	\$11.40	\$11.40	1.00
87184	ANTIBIOTIC SENSITIVITY, EACH	2	3	0	3	\$25.80	\$8.60	\$8.60	1.00
87205	SMEAR, STAIN & INTERPRET	2	4	0	5	\$39.08	\$7.82	\$9.77	1.25
87250	VIRUS INOCULATION FOR TEST	2	5	0	18	\$188.73	\$9.37	\$33.75	3.60
87999	MICROBIOLOGY PROCEDURE	2	2	0	2	\$49.20	\$24.60	\$24.60	1.00
88106	MICROSCOPIC EXAM OF CELLS	2	5	0	5	\$87.30	\$17.46	\$17.46	1.00
88107	MICROSCOPIC EXAM OF CELLS	2	4	0	5	\$92.27	\$18.45	\$23.07	1.25
88170	FINE NEEDLE ASPIRATION	2	2	0	2	\$66.91	\$33.46	\$33.46	1.00
88327	TISSUE CULTURE, BONE MARROW	2	4	0	6	\$367.00	\$61.17	\$91.75	1.50
88332	TISSUE EXAM BY PATHOLOGIST	2	3	0	3	\$117.50	\$39.17	\$39.17	1.00
88325	COMPREHENSIVE REVIEW OF DATA	2	2	0	2	\$41.59	\$20.80	\$20.80	1.00
88342	IMMUNOCYTOCHEMISTRY	2	2	0	5	\$150.00	\$30.00	\$75.00	2.50
90000	OFFICE/OP VISIT, NEW, BRIEF	2	2	2	2	\$40.90	\$20.45	\$20.45	1.00
90017	OFFICE/OP VISIT, NEW, EXTEND	2	2	2	2	\$27.00	\$13.50	\$13.50	1.00
90160	HOME VISIT, INTERMED	2	13	18	18	\$1,272.60	\$70.70	\$97.89	1.38
90560	EMERGENCY CARE, INTERMEDIATE	2	3	2	3	\$133.63	\$44.54	\$44.54	1.00
90640	BRIEF FOLLOW-UP CONSULT	2	5	9	9	\$143.47	\$15.94	\$28.69	1.80
90642	INTERMEDIATE FOLLOWUP CONSULT	2	3	1	3	\$166.75	\$55.58	\$55.58	1.00
90650	2ND OR 3RD OPINION	2	2	2	2	\$53.28	\$26.64	\$26.64	1.00
90699	GENERAL MEDICAL SERVICE	2	4	8	8	\$623.59	\$77.95	\$155.90	2.00
90843	PSYCHOTHERAPY, 20-30 MIN	2	5	4	6	\$282.37	\$47.06	\$56.47	1.20
92557	COMPREHENSIVE HEARING TEST	2	2	3	2	\$31.00	\$15.50	\$15.50	1.00
95155	ANTIGEN THERAPY SERVICES	2	2	3	3	\$124.80	\$41.60	\$62.40	1.50
96400	CHEMOTHERAPY, (SC)/(CM)	2	15	16	16	\$145.00	\$9.06	\$9.67	1.07
96520	PUMP REFILLING, MAINTENANCE	2	4	5	5	\$79.35	\$15.87	\$19.84	1.25
98800	SPECIMEN HANDLING	2	2	0	2	\$279.26	\$139.63	\$139.63	1.00
99001	INITIAL HOSPITAL CARE	2	6	0	6	\$73.75	\$12.29	\$12.29	1.00
99222	SUBSEQUENT HOSPITAL CARE	2	2	0	2	\$85.00	\$42.50	\$42.50	1.00
99232	HOSPITAL DISCHARGE DAY	2	2	0	2	\$69.77	\$34.89	\$34.89	1.00
99238	HOME VISIT, ESTAB PATIENT	2	2	0	2	\$51.50	\$25.75	\$25.75	1.00
99351	HOME VISIT, ESTAB PATIENT	2	12	22	22	\$1,283.00	\$58.32	\$106.92	1.83
10060	DRAINAGE OF SKIN ABSCESS	1	1	0	1	\$13.00	\$13.00	\$13.00	1.00

TRI-SERVICE CHAMPUS STATISTICAL DATABASE PROJECT (TCSDP)

HSCIA, FSH, TX 78234

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
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(continued)

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11101	BIOPSY, EACH ADDED LESION	1	1	0	1	\$14.25	\$14.25	\$14.25	1.00
11600	REMOVAL OF SKIN LESION	1	1	0	2	\$77.27	\$38.64	\$77.27	2.00
11620	REMOVAL OF SKIN LESION	1	1	0	2	\$444.37	\$222.19	\$444.37	2.00
17100	DESTRUCTION OF SKIN LESION	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
17340	CRYOTHERAPY OF SKIN	1	3	0	3	\$37.26	\$12.42	\$12.42	1.00
20600	DRAIN/INJECT JOINT/BURSA	1	1	0	1	\$27.75	\$27.75	\$27.75	1.00
23331	REMOVE SHOULDER FOREIGN BODY	1	1	0	1	\$60.00	\$60.00	\$60.00	1.00
26720	TREAT FINGER FRACTURE, EACH	1	1	0	1	\$142.50	\$142.50	\$142.50	1.00
27299	PELVIS/HIP JOINT SURGERY	1	1	0	1	\$140.00	\$140.00	\$140.00	1.00
29125	APPLY FOREARM SPLINT	1	1	0	6	\$486.00	\$81.00	\$486.00	6.00
29405	APPLY SHORT LEG CAST	1	1	0	1	\$16.00	\$16.00	\$16.00	1.00
31250	NASAL ENDOSCOPY, DIAGNOSTIC	1	1	0	1	\$131.25	\$131.25	\$131.25	1.00
31710	INSERTION OF AIRWAY CATHETER	1	1	0	1	\$53.74	\$53.74	\$53.74	1.00
32810	CLOSE CHEST AFTER DRAINAGE	1	1	0	1	\$84.00	\$84.00	\$84.00	1.00
33102	REPAIR DEFECT OF ARTERY	1	1	0	1	\$41.49	\$41.49	\$41.49	1.00
36299	VESSEL INJECTION PROCEDURE	1	1	0	1	\$720.00	\$720.00	\$720.00	1.00
36405	DRAWING BLOOD	1	4	0	5	\$588.00	\$588.00	\$588.00	1.00
36410	DRAWING BLOOD	1	5	0	5	\$135.00	\$27.00	\$33.75	1.25
36460	TRANSFUSION SERVICE, FETAL	1	1	0	1	\$100.80	\$20.16	\$20.16	1.00
36488	INSERTION OF CATHETER, VEIN	1	1	0	1	\$127.60	\$127.60	\$127.60	1.00
36489	INSERTION OF CATHETER, VEIN	1	1	0	1	\$145.25	\$145.25	\$145.25	1.00
36520	PLASMA AND/OR CELL EXCHANGE	1	6	0	1	\$105.00	\$105.00	\$105.00	1.00
38241	BONE MARROW TRANSPLANTATION	1	1	0	6	\$3,465.00	\$577.50	\$577.50	1.00
38255	38255	1	1	0	1	\$39.00	\$39.00	\$39.00	1.00
38265	38265	1	1	0	8	\$720.00	\$90.00	\$720.00	8.00
38500	BIOPSY/REMOVAL, LYMPH NODE(S)	1	1	0	1	\$1,721.00	\$1,721.00	\$1,721.00	1.00
38510	BIOPSY/REMOVAL, LYMPH NODE(S)	1	1	0	1	\$245.43	\$245.43	\$245.43	1.00
44005	FREEDING OF BOWEL ADHESION	1	1	0	1	\$262.50	\$262.50	\$262.50	1.00
46260	HENORRHOIDECTOMY	1	1	0	1	\$117.70	\$117.70	\$117.70	1.00
47000	NEEDLE BIOPSY OF LIVER	1	1	0	1	\$383.80	\$383.80	\$383.80	1.00
47100	WEDGE BIOPSY OF LIVER	1	1	0	1	\$40.00	\$40.00	\$40.00	1.00
47600	REMOVAL OF GALLBLADDER	1	1	0	1	\$395.16	\$395.16	\$395.16	1.00
49000	EXPLORATION OF ABDOMEN	1	1	0	2	\$664.59	\$332.30	\$664.59	2.00
49999	ABDOMEN SURGERY PROCEDURE	1	1	0	1	\$642.84	\$642.84	\$642.84	1.00
51010	DRAINAGE OF BLADDER	1	1	0	1	\$436.00	\$436.00	\$436.00	1.00
53670	INSERT URINARY CATHETER	1	1	0	1	\$172.80	\$172.80	\$172.80	1.00
54150	CIRCUMCISION	1	2	0	2	\$50.73	\$25.37	\$25.37	1.00
58150	TOTAL HYSTERECTOMY	1	1	0	1	\$70.00	\$70.00	\$70.00	1.00
58980	LAPAROSCOPY OF PELVIS	1	1	0	1	\$260.00	\$260.00	\$260.00	1.00
58983	LAPAROSCOPY; TUBAL BLOCK	1	1	0	1	\$540.00	\$540.00	\$540.00	1.00
62272	DRAIN SPINAL FLUID	1	1	0	1	\$487.50	\$487.50	\$487.50	1.00
64450	INJECTION FOR NERVE BLOCK	1	1	0	1	\$115.88	\$115.88	\$115.88	1.00
64795	BIOPSY OF NERVE	1	1	0	2	\$250.00	\$125.00	\$250.00	2.00
		1	1	0	1	\$100.00	\$100.00	\$100.00	1.00

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(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY GOVT SERV PER SERV	SVC TO EPISODE RATIO
66984	REMOVE CATARACT, INSERT LENS	1	1	0	1	\$2,000.00	\$2,000.00	\$2,000.00	1.00
69436	CREATE EARDRUM OPENING	1	1	0	1	\$255.00	\$255.00	\$255.00	1.00
70160	X-RAY EXAM OF NASAL BONES	1	1	0	1	\$16.25	\$16.25	\$16.25	1.00
70210	X-RAY EXAM OF SINUSES	1	1	0	1	\$45.50	\$45.50	\$45.50	1.00
70250	X-RAY EXAM OF SKULL	1	1	0	1	\$20.10	\$20.10	\$20.10	1.00
70355	PANORAMIC X-RAY OF JAWS	1	1	0	1	\$4.60	\$4.60	\$4.60	1.00
70460	CONTRAST CAT SCAN OF HEAD	1	1	0	1	\$105.60	\$105.60	\$105.60	1.00
70488	CONTRAST CAT SCANS FACE/JAW	1	1	0	1	\$166.50	\$166.50	\$166.50	1.00
70491	CONTRAST CAT OF NECK TISSUE	1	1	0	1	\$148.19	\$148.19	\$148.19	1.00
70551	MAGNETIC IMAGE, BRAIN (MRI)	1	1	0	1	\$1,402.00	\$1,402.00	\$1,402.00	1.00
71035	CHEST X-RAY	1	1	0	1	\$18.00	\$18.00	\$18.00	1.00
71270	CONTRAST CAT SCANS OF CHEST	1	1	0	1	\$115.13	\$115.13	\$115.13	1.00
72052	X-RAY EXAM OF NECK SPINE	1	1	0	1	\$34.60	\$34.60	\$34.60	1.00
72072	X-RAY EXAM OF THORACIC SPINE	1	1	0	1	\$5.93	\$5.93	\$5.93	1.00
72100	X-RAY EXAM OF LOWER SPINE	1	2	0	2	\$73.39	\$36.70	\$36.70	1.00
72128	CAT SCAN OF THORAX SPINE	1	1	0	1	\$180.00	\$180.00	\$180.00	1.00
72148	MAGNETIC IMAGE, LUMBAR SPINE	1	1	0	1	\$439.53	\$439.53	\$439.53	1.00
72170	X-RAY EXAM OF PELVIS	1	1	0	1	\$14.18	\$14.18	\$14.18	1.00
72190	X-RAY EXAM OF PELVIS	1	1	0	2	\$646.00	\$323.00	\$646.00	2.00
72271	CONTRAST X-RAY OF SPINE	1	1	0	1	\$275.96	\$275.96	\$275.96	1.00
73000	X-RAY EXAM OF COLLARBONE	1	1	0	1	\$42.80	\$42.80	\$42.80	1.00
73060	X-RAY EXAM OF HUMERUS	1	1	0	2	\$35.80	\$17.90	\$35.80	2.00
73100	X-RAY EXAM OF WRIST	1	1	0	1	\$45.00	\$45.00	\$45.00	1.00
73110	X-RAY EXAM OF WRIST	1	1	0	1	\$44.00	\$44.00	\$44.00	1.00
73520	X-RAY EXAM OF HIPS	1	1	0	1	\$75.00	\$75.00	\$75.00	1.00
73560	X-RAY EXAM OF KNEE	1	1	0	1	\$53.50	\$53.50	\$53.50	1.00
73630	X-RAY EXAM OF FOOT	1	1	0	1	\$23.24	\$23.24	\$23.24	1.00
73660	X-RAY EXAM OF TOE(S)	1	1	0	1	\$31.00	\$31.00	\$31.00	1.00
74220	CONTRAST XRAY EXAM, ESOPHAGUS	1	1	0	1	\$30.30	\$30.30	\$30.30	1.00
74240	X-RAY EXAM UPPER GI TRACT	1	1	0	1	\$138.60	\$138.60	\$138.60	1.00
74246	CONTRAST XRAY UPPER GI TRACT	1	1	0	1	\$138.50	\$138.50	\$138.50	1.00
74456	X-RAY EXAM URETHRA/BLADDER	1	1	0	1	\$57.94	\$57.94	\$57.94	1.00
75606	CONTRAST X-RAY EXAM OF AORTA	1	1	0	1	\$444.40	\$444.40	\$444.40	1.00
75971	VASCULAR BIOPSY	1	1	0	1	\$62.60	\$62.60	\$62.60	1.00
76020	X-RAYS FOR BONE AGE	1	1	0	1	\$35.64	\$35.64	\$35.64	1.00
76070	CT SCAN, BONE DENSITY STUDY	1	1	0	4	\$986.75	\$246.69	\$986.75	4.00
76090	MAMMOGRAM, ONE BREAST	1	1	0	1	\$64.80	\$64.80	\$64.80	1.00
76091	MAMMOGRAM, BOTH BREASTS	1	1	0	1	\$48.76	\$48.76	\$48.76	1.00
76370	CAT SCAN FOR THERAPY GUIDE	1	1	0	1	\$28.25	\$28.25	\$28.25	1.00
76926	ECHO EXAM OF HEAD & TRUNK	1	1	0	4	\$98.00	\$24.50	\$98.00	4.00
77280	SET RADIATION THERAPY FIELD	1	1	0	8	\$550.00	\$68.75	\$550.00	8.00
77333	RADIATION TREATMENT AID(S)	1	1	0	1	\$55.40	\$55.40	\$55.40	1.00
77399	EXTERNAL RADIATION DOSIMETRY	1	1	0	1	\$495.00	\$495.00	\$495.00	1.00
77417	RADIOLOGY PORT FILM(S)	1	2	0	6	\$135.08	\$22.51	\$135.08	3.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
78216	NUCLEAR SCAN, LIVER/SPLEEN	1	1	0	1	\$26.00	\$26.00	\$26.00	1.00
78223	NUCLEAR SCAN, BILIARY TRACT	1	1	0	1	\$32.08	\$32.08	\$32.08	1.00
78305	NUCLEAR SCAN OF BONES	1	1	0	1	\$0.00	\$0.00	\$0.00	1.00
78474	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$167.00	\$167.00	\$167.00	1.00
78480	NUCLEAR SCAN, HEART MUSCLE	1	1	0	1	\$49.56	\$49.56	\$49.56	1.00
78580	NUCLEAR SCAN OF LUNG	1	1	0	1	\$64.43	\$64.43	\$64.43	1.00
78594	NUCLEAR SCAN OF LUNG	1	1	0	1	\$89.70	\$89.70	\$89.70	1.00
78803	NUCLEAR SCAN OF TUMOR (3D)	1	2	0	5	\$307.73	\$61.55	\$153.87	2.50
80002	1-2 CLINICAL CHEM TESTS	1	1	0	2	\$34.73	\$17.36	\$34.73	2.00
80003	3 CLINICAL CHEMISTRY TESTS	1	1	0	2	\$31.50	\$15.75	\$31.50	2.00
80009	9 CLINICAL CHEMISTRY TESTS	1	1	0	1	\$262.00	\$262.00	\$262.00	1.00
80031	DRUG MONITORING, ONE DRUG	1	1	0	2	\$17.60	\$8.80	\$17.60	2.00
80050	GENERAL HEALTH SCREEN PANEL	1	1	0	1	\$23.96	\$23.96	\$23.96	1.00
80090	ANTIBODY PANEL	1	1	0	1	\$83.00	\$83.00	\$83.00	1.00
80099	PANEL, NOT SPECIFIED	1	1	0	1	\$572.00	\$572.00	\$572.00	1.00
80502	LAB PATHOLOGY CONSULTATION	1	1	0	4	\$97.20	\$24.30	\$97.20	4.00
81015	MICROSCOPIC EXAM OF URINE	1	1	0	1	\$8.00	\$8.00	\$8.00	1.00
81030	URINE SEDIMENT ANALYSIS	1	1	0	1	\$7.00	\$7.00	\$7.00	1.00
82011	ACETYSALICYLIC ACID ASSAY	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00
82270	TEST FECES FOR BLOOD	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00
82607	RIA ASSAY FOR VITAMIN B-12	1	1	0	1	\$32.29	\$32.29	\$32.29	1.00
82670	RIA ASSAY OF ESTRADIOL	1	1	0	1	\$56.25	\$56.25	\$56.25	1.00
82672	ESTROGEN ASSAY	1	1	0	2	\$52.92	\$26.46	\$52.92	2.00
82746	BLOOD FOLIC ACID RIA	1	1	0	1	\$32.29	\$32.29	\$32.29	1.00
83001	PITUITARY GONADOTROPIN RIA	1	1	0	2	\$64.00	\$32.00	\$64.00	2.00
83002	PITUITARY GONADOTROPINS RIA	1	1	0	1	\$37.08	\$37.08	\$37.08	1.00
83550	SERUM IRON BINDING TEST	1	1	0	1	\$22.50	\$22.50	\$22.50	1.00
83705	ASSAY BLOOD LIPID GROUPS	1	1	0	1	\$21.00	\$21.00	\$21.00	1.00
84175	ASSAY BODY PROTEINS	1	1	0	1	\$12.16	\$12.16	\$12.16	1.00
84231	RADIOIMMUNOASSAY	1	1	0	1	\$61.69	\$61.69	\$61.69	1.00
84295	ASSAY BLOOD SODIUM	1	1	0	1	\$12.00	\$12.00	\$12.00	1.00
84315	BODY FLUID SPECIFIC GRAVITY	1	1	0	1	\$3.10	\$3.10	\$3.10	1.00
84403	RIA ASSAY BLOOD TESTOSTERONE	1	1	0	1	\$46.80	\$46.80	\$46.80	1.00
84420	ASSAY THEOPHYLLINE	1	1	0	1	\$34.00	\$34.00	\$34.00	1.00
84435	ASSAY THYROXINE (T-4)	1	1	0	1	\$23.60	\$23.60	\$23.60	1.00
84439	RIA ASSAY, FREE THYROXINE	1	1	0	1	\$0.51	\$0.51	\$0.51	1.00
84450	UV-ASSAY TRANSAMINASE (SGOT)	1	1	0	1	\$15.00	\$15.00	\$15.00	1.00
84478	ASSAY BLOOD TRIGLYCERIDES	1	1	0	1	\$138.00	\$138.00	\$138.00	1.00
84555	ASSAY URIC ACID	1	1	0	1	\$10.00	\$10.00	\$10.00	1.00
84703	CHORIONIC GONADOTROPIN ASSAY	1	1	0	1	\$18.54	\$18.54	\$18.54	1.00
85018	HEMOGLOBIN, COLORIMETRIC	1	1	0	1	\$3.20	\$3.20	\$3.20	1.00
85030	AUTOMATED HEMOGRAM	1	9	0	9	\$39.42	\$4.38	\$4.38	1.00
85101	ASPIRATE, STAIN BONE MARROW	1	1	0	1	\$22.88	\$22.88	\$22.88	1.00
85362	FIBRIN DEGRADATION PRODUCTS	1	1	0	1	\$14.40	\$14.40	\$14.40	1.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF GOVT PAY PER SERV	SVC TO EPISODE RATIO
85667	T-CELL DEPLETION	1	1	0	1	\$625.00	\$625.00	\$625.00	1.00
85670	THROMBIN TIME; PLASMA	1	2	0	2	\$5.34	\$2.67	\$2.67	1.00
86006	ANTIBODY, QUALITATIVE, FIRST	1	2	0	2	\$29.21	\$14.61	\$14.61	1.00
86011	LEUKOCYTE ANTIBODY DETECTION	1	1	0	1	\$45.80	\$45.80	\$45.80	1.00
86070	BLOOD COMPATIBILITY TEST	1	1	0	2	\$5.60	\$2.80	\$5.60	2.00
86077	PHYSICIAN BLOOD BANK SERVICE	1	1	0	1	\$9.17	\$9.17	\$9.17	1.00
86083	BLOOD TYPING;ANTIBODY SCREEN	1	1	0	1	\$10.10	\$10.10	\$10.10	1.00
86084	BLOOD TYPING;ANTIGEN SCREEN	1	1	0	2	\$5.00	\$5.00	\$10.00	2.00
86085	BLOOD TYPING;ANTIGEN SCREEN	1	1	0	2	\$26.00	\$13.00	\$26.00	2.00
86095	BLOOD TYPING, OTHER ANTIGENS	1	1	0	1	\$14.40	\$14.40	\$14.40	1.00
86128	COLLECT STORAGE PT OWN BLOOD	1	6	0	6	\$464.24	\$77.37	\$77.37	1.00
86151	CEA ASSAY, RIA OR EIA	1	1	0	1	\$44.00	\$44.00	\$44.00	1.00
86298	HEPATITIS A ANTIBODY TEST	1	1	0	1	\$54.32	\$54.32	\$54.32	1.00
86300	HETEROPHILE ANTIBODY SCREEN	1	1	0	1	\$9.24	\$9.24	\$9.24	1.00
86319	IMMUNOASSAY FOR DRUGS	1	1	0	1	\$56.92	\$56.92	\$56.92	1.00
86353	LYMPHOCYTE TRANSFORMATION	1	1	0	1	\$168.00	\$168.00	\$168.00	1.00
86357	LYMPHOCYTES, T&B DISTINCTION	1	1	0	1	\$32.00	\$32.00	\$32.00	1.00
86411	PRETREATMENT RBCS; ENZYMES	1	1	0	1	\$10.50	\$10.50	\$10.50	1.00
86430	RHEUMATOID FACTOR TEST	1	1	0	1	\$14.00	\$14.00	\$14.00	1.00
86593	BLOOD SEROLOGY, QUANTITATIVE	1	1	0	2	\$32.00	\$16.00	\$32.00	2.00
86595	TISSUE CULTURE	1	6	0	6	\$230.26	\$38.38	\$38.38	1.00
86805	LYMPHOCYTOTOXICITY ASSAY	1	1	0	1	\$90.00	\$90.00	\$90.00	1.00
87072	CULTURE OF SPECIMEN BY KIT	1	2	0	4	\$85.20	\$21.30	\$42.60	2.00
87075	CULTURE SPECIMEN, BACTERIA	1	4	0	9	\$306.25	\$34.03	\$76.56	2.25
87076	BACTERIA IDENTIFICATION	1	1	0	1	\$8.66	\$8.66	\$8.66	1.00
87087	URINE BACTERIA CULTURE	1	2	0	2	\$4.50	\$2.25	\$2.25	1.00
87118	MYCOBACTERIA IDENTIFICATION	1	2	0	5	\$58.47	\$11.69	\$29.24	2.50
87163	SPECIAL MICROBIOLOGY CULTURE	1	1	0	1	\$22.25	\$22.25	\$22.25	1.00
87175	ASSAY, ENDOTOXIN, BACTERIAL	1	6	0	6	\$318.00	\$53.00	\$53.00	1.00
87210	SNEAR, STAIN & INTERPRET	1	1	0	1	\$11.25	\$11.25	\$11.25	1.00
87252	VIRUS INOCULATION FOR TEST	1	1	0	2	\$61.12	\$30.56	\$61.12	2.00
88150	CYTOPATHOLOGY, PAP SMEAR	1	1	0	1	\$3.71	\$3.71	\$3.71	1.00
88160	CYTOPATHOLOGY	1	1	0	1	\$25.00	\$25.00	\$25.00	1.00
88182	CELL MARKER STUDY	1	3	0	3	\$46.47	\$15.49	\$15.49	1.00
88300	TISSUE EXAM BY PATHOLOGIST	1	1	0	1	\$18.00	\$18.00	\$18.00	1.00
88307	TISSUE EXAM BY PATHOLOGIST	1	1	0	1	\$57.14	\$57.14	\$57.14	1.00
88318	CHEMICAL HISTOCHEMISTRY	1	1	0	2	\$5.86	\$2.93	\$5.86	2.00
88319	ENZYME HISTOCHEMISTRY	1	1	0	1	\$26.25	\$26.25	\$26.25	1.00
88329	PATHOLOGY CONSULT IN SURGERY	1	1	0	1	\$17.11	\$17.11	\$17.11	1.00
88348	ELECTRON MICROSCOPY	1	1	0	1	\$93.00	\$93.00	\$93.00	1.00
89190	NASAL SMEAR FOR EOSINOPHILS	1	1	0	1	\$6.00	\$6.00	\$6.00	1.00
90115	HOME VISIT, NEW, INTERMED	1	2	2	4	\$130.00	\$32.50	\$65.00	2.00
90140	HOME VISIT, BRIEF	1	1	2	2	\$88.00	\$44.00	\$88.00	2.00
90150	HOME VISIT, LIMITED	1	3	2	2	\$176.00	\$88.00	\$58.67	0.67

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV
(continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
90170	HOME VISIT, EXTENDED	1	1	1	1	\$95.00	\$95.00	\$95.00	1.00
90200	HOSPITAL CARE, NEW, BRIEF	1	2	2	2	\$150.00	\$75.00	\$75.00	1.00
90280	HOSPITAL VISIT, COMPREHENSIVE	1	1	0	1	\$105.75	\$105.75	\$105.75	1.00
90282	NORMAL NEWBORN CARE, HOSPITAL	1	1	0	1	\$26.18	\$26.18	\$26.18	1.00
90570	EMERGENCY CARE, EXTENDED	1	1	1	1	\$61.80	\$61.80	\$61.80	1.00
90643	COMPLEX FOLLOW-UP CONSULT	1	1	1	1	\$57.98	\$57.98	\$57.98	1.00
90712	ORAL POLIOVIRUS IMMUNIZATION	1	1	1	1	\$17.40	\$17.40	\$17.40	1.00
90742	SPECIAL PASSIVE IMMUNIZATION	1	5	5	7	\$904.09	\$129.16	\$180.82	1.40
90764	PREVENTIVE MEDICINE, INFANT	1	1	1	1	\$18.75	\$18.75	\$18.75	1.00
90799	THERAPEUTIC/DIAG INJECTION	1	4	5	4	\$545.50	\$136.38	\$136.38	1.00
90801	PSYCHIATRIC INTERVIEW	1	1	0	0	\$87.60		\$87.60	0.00
90847	SPECIAL FAMILY THERAPY	1	3	4	4	\$194.75	\$48.69	\$64.92	1.33
90887	CONSULTATION WITH FAMILY	1	1	0	1	\$65.56	\$65.56	\$65.56	1.00
92004	EYE EXAM, NEW PATIENT	1	1	1	1	\$32.00	\$32.00	\$32.00	1.00
92012	EYE EXAM, ESTABLISHED PATIENT	1	1	1	1	\$36.48	\$36.48	\$36.48	1.00
92014	EYE EXAM, ESTABLISHED PATIENT	1	1	1	1	\$26.68	\$26.68	\$26.68	1.00
92020	SPECIAL EYE EVALUATION	1	1	1	1	\$30.00	\$30.00	\$30.00	1.00
92225	SPECIAL EYE EXAM, INITIAL	1	1	1	1	\$32.00	\$32.00	\$32.00	1.00
92506	SPEECH & HEARING EVALUATION	1	1	12	6	\$108.00	\$18.00	\$108.00	6.00
92542	POSITIONAL NYSTAGMUS TEST	1	2	2	2	\$171.70	\$85.85	\$85.85	1.00
92543	CALORIC VESTIBULAR TEST	1	1	1	1	\$90.00	\$90.00	\$90.00	1.00
92545	OSCILLATING TRACKING TEST	1	2	2	2	\$48.55	\$24.28	\$24.28	1.00
92567	TYMPANOMETRY	1	1	1	1	\$11.25	\$11.25	\$11.25	1.00
92591	HEARING AID EXAM, BOTH EARS	1	1	1	1	\$39.20	\$39.20	\$39.20	1.00
93018	CARDIOVASCULAR STRESS TEST	1	1	1	1	\$27.00	\$27.00	\$27.00	1.00
93308	ECHO EXAM OF HEART	1	2	2	2	\$163.15	\$81.58	\$81.58	1.00
93320	DOPPLER ECHO EXAM, HEART	1	1	1	1	\$95.00	\$95.00	\$95.00	1.00
93325	DOPPLER COLOR FLOW	1	1	1	1	\$45.00	\$45.00	\$45.00	1.00
93505	BIOPSY OF HEART LINING	1	1	1	1	\$51.62	\$51.62	\$51.62	1.00
93544	INJECTION FOR AORTOGRAPHY	1	1	1	1	\$13.93	\$13.93	\$13.93	1.00
93545	INJECTION FOR CORONARY X-RAYS	1	2	2	2	\$46.00	\$23.00	\$23.00	1.00
93549	HEART CATHETER & ANGIOGRAM	1	1	1	1	\$150.95	\$150.95	\$150.95	1.00
93720	TOTAL BODY PLETHYSMOGRAPHY	1	2	2	2	\$67.50	\$33.75	\$33.75	1.00
93734	ANALYZE PACEMAKER SYSTEM	1	1	1	1	\$50.00	\$50.00	\$50.00	1.00
93799	CARDIOVASCULAR PROCEDURE	1	4	4	4	\$334.00	\$83.50	\$83.50	1.00
93875	EXTRACRANIAL STUDY	1	1	0	0	\$-19.75		\$-19.75	0.00
94200	LUNG FUNCTION TEST (MBC/MVV)	1	1	1	1	\$15.00	\$15.00	\$15.00	1.00
94650	PRESSURE BREATHING (IPPB)	1	1	1	1	\$135.00	\$135.00	\$135.00	1.00
94760	MEASURE BLOOD OXYGEN LEVEL	1	1	1	1	\$31.65	\$31.65	\$31.65	1.00
94770	EXHALED CARBON DIOXIDE TEST	1	1	1	1	\$13.20	\$13.20	\$13.20	1.00
95120	IMMUNOTHERAPY, ONE ANTIGEN	1	1	1	1	\$6.00	\$6.00	\$6.00	1.00
95900	MOTOR NERVE CONDUCTION TEST	1	1	1	1	\$30.00	\$30.00	\$30.00	1.00
97010	HOT OR COLD PACKS THERAPY	1	1	4	4	\$16.00	\$4.00	\$16.00	4.00
97112	NEUROMUSCULAR REEDUCATION	1	1	3	3	\$75.00	\$25.00	\$75.00	3.00

DEPARTMENT OF DEFENSE CHAMPUS
ALLOGENEIC & AUTOLOGOUS BONE MARROW TRANSPLANTS
TOTAL PATIENT TREATMENT EPISODES
PROFESSIONAL SERVICES DETAILED WORKLOAD
HOSPITAL END DATE: FISCAL YEARS 1989-JULY 1992

BMT_TYPE=AUTOLOGOUS PROF CAT=BMT AMB PROF SERV (continued)

PRCD CODE	PRCD NAME	# PTS	# TRTMT EPISODES	# VISITS	# SVCS	PROF SERV GOVT PAY	PROF GOVT PAY PER EPISODE	PROF PAY PER SERV	SVC TO EPISODE RATIO
97114	FUNCTIONAL ACTIVITY THERAPY	1	1	3	3	\$75.00	\$25.00	\$75.00	3.00
97128	ULTRASOUND THERAPY	1	1	1	1	\$12.80	\$12.80	\$12.80	1.00
97530	KINETIC THERAPY	1	1	4	4	\$80.00	\$20.00	\$80.00	4.00
97540	TRAINING FOR DAILY LIVING	1	9	0	16	\$1,517.20	\$94.83	\$168.58	1.78
97799	PHYSICAL MEDICINE PROCEDURE	1	6	12	12	\$890.00	\$74.17	\$148.33	2.00
99034	MEDICAL SERVICES, UNUSUAL HRS	1	2	0	3	\$86.40	\$28.80	\$43.20	1.50
99150	PROLONGED MD ATTENDANCE	1	10	0	10	\$1,041.40	\$104.14	\$104.14	1.00
99231	SUBSEQUENT HOSPITAL CARE	1	1	0	3	\$0.00	\$0.00	\$0.00	3.00
99241	OFFICE CONSULTATION	1	1	0	1	\$67.00	\$67.00	\$67.00	1.00
99242	OFFICE CONSULTATION	1	1	0	2	\$15.00	\$7.50	\$15.00	2.00
99254	INITIAL INPATIENT CONSULT	1	1	1	1	\$154.70	\$154.70	\$154.70	1.00
99282	EMERGENCY DEPT VISIT	1	1	1	1	\$43.60	\$43.60	\$43.60	1.00
99283	EMERGENCY DEPT VISIT	1	1	1	1	\$50.96	\$50.96	\$50.96	1.00
99343	HOME VISIT, NEW PATIENT	1	1	3	3	\$240.00	\$80.00	\$240.00	3.00
99352	HOME VISIT, ESTAB PATIENT	1	1	4	4	\$50.99	\$12.75	\$50.99	4.00
99499	UNLISTED E/M SERVICE	1	1	1	1	\$20.00	\$20.00	\$20.00	1.00
TYPE									
BMT_TYPE		4,828	2,928	13,991	\$879,518.87				
		13004	5,907	38,626	\$2,581,772.87				
		=====	=====	=====	=====				
		35376	13,966	99,653	\$7,482,443.13				